

NURSE REVALIDATION POLICY

(Replaces Policy No. TP/WF/222 V2)

POLICY NUMBER	TP/WF/222
POLICY VERSION	V3
RATIFYING COMMITTEE	Professional Policy forum
DATE RATIFIED	20 th December 2021
DATE OF EQUALITY & HUMAN RIGHTS IMPACT ASSESSMENT (EHRIA)	
NEXT REVIEW DATE	19 th December 2023
POLICY SPONSOR	Chief Nursing Officer
POLICY AUTHOR	Deputy Chief Nurse Lead Nurse for Safer Staffing

EXECUTIVE SUMMARY:

This policy provides information about the Trust's requirements to comply with legislation and the Nursing and Midwifery Council (NMC) guidelines for nursing revalidation. It also summarises the principles and guidelines from the NMC, and how the appraisal policy will support the preparation for nursing revalidation and that all registered nurses and nursing associates (including those on the Temporary Staffing Service register or known as Bank) remain up to date and fit to practice. It outlines the responsibilities for those involved in the revalidation process, managers and staff alike and ensures our staff delivers safe, effective and quality care.

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NURSE REVALIDATION POLICY

1 Introduction

From April 2016 the NMC requires all registered nurses at the point of their renewal of registration, to demonstrate that they are abiding by the [NMC's Code](#) of standards of practice and behaviour. Nursing Associates have now been added to the NMC Register from October 2018. This requirement reflects the Trust's own values and supports the aims set out in our 20/20 Vision.

This policy sets out Sussex Partnership NHS Foundation Trust's (SPFT) requirements to comply with legislation and Nursing & Midwifery Council (NMC) [guidelines for the revalidation](#) of nurses.

This policy summarises the principles and guidance from the NMC and also shows how the Trust's annual appraisal process can support nurses and nursing associate in preparation for revalidation.

SPFT believes that appraisal for all staff is a professional process of constructive dialogue in which 'continuing the conversation' can enable the registered nurse and nursing associate being appraised to have a formal, structured opportunity to reflect on their work and to consider how their effectiveness might be enhanced to complement efforts in the drive for quality and safety of patient care. The appraisal process will support the registered nurse and nursing associate in ensuring they are prepared for revalidation.

1.1 Purpose

This policy outlines the process and arrangements to support revalidation for registered nurses and nursing associate employed by SPFT. The aim of the policy is to assist nurses and the Trust in the implementation and delivery of a robust and quality assured system to support revalidation that meets the requirements of the NMC.

1.2 Scope

This policy applies to all registered nurses and nursing associates employed by SPFT who are required to maintain a professional registration as a contractual part of their employment.

The policy also applies to registered nurses and nursing associates working on the SPFT Temporary Staffing Service, also known as the "Bank" as this is also a contractual part of their employment with SPFT via the Bank.

The policy will also apply to those who wish to maintain their registration, relying on their skills, knowledge and experience of being a registered nurse and nursing associate working in research, policy, education, trade union roles or management roles.

There are separate procedural documents providing more information about the revalidation process which can be found on the [NMC website](#) 'Nursing & Midwifery Revalidation'. The procedural documents and templates can also be found on My Learning via the Trust intranet, SUSI.

Nurses and nursing associates who work on a temporary basis through an agency are not covered by this policy. The agency is accountable for providing the annual appraisal arrangements and supporting revalidation for these staff.

1.3 Definitions

The term 'nurse' or 'midwife' refers to all registered nurses and/or midwives who are registered with the Nursing & Midwifery Council (NMC), this includes the nursing associate (Registrant). It does not refer to nurses in training who are accountable to their training provider.

2 Process of Revalidation

All registered nurses must set up an online account with the NMC to enable them to register and for the NMC to notify the registrant when their revalidation is due.

In order to comply with the NMC's requirements, all registered nurses will be required to submit their Notification of Practice (NoP) within the agreed timeframe. All registrants should read the [guidance](#) and supporting resources on the NMC website.

It is the registrant's responsibility to make an application for revalidation to the NMC via their NMC Online account. This is only possible 60 days **before** the Revalidation application date the NMC has set the registrant.

Revalidation will require the registrant to

- complete 5 reflective accounts,
- demonstrate the registrant has undertaken and can evidence their continuing professional development (CPD) which includes as a minimum 20 hours face-to-face training;
- confirm they have completed the minimum requirement of 450 hours of practice over the 3 years;
- demonstrate they have received 5 pieces of feedback from colleagues, patients and carers.
- Meet with a NMC registrant to enable a reflective discussion which is signed by both registrants
- Confirm with the NMC by the submission of the 'Health and Character form that the nurse is fit to practice.

The registrant's supervision and appraisals over a three-year cycle can help support this process.

It is a registrant's responsibility to ensure that they are able to revalidate every three years if they wish to continue to practice.

Registrants therefore need to co-operate with the processes agreed by SPFT for supervision, annual appraisal and revalidation, and to produce supporting information from the services in which they work to demonstrate to the Chief Nurse and the NMC that they are up to date and fit to practice.

2.1 Requirements of Revalidation

The NMC guidelines (2015) specify these requirements over each three year period:

- A minimum of [450 practice hours](#) over the three years prior to the renewal of registration. Practice hours can also be where the employee relies on their skills, knowledge and experience of being a registered working in non-clinical roles such as nursing management, research, policy and education and Trade union. The Trust can support this evidence with the Job descriptions and specifications and from RosterPro Central.
- Minimum 35 hours of [continuing professional development](#) (CPD) relevant to your scope of practice as a nurse since last registration, (of which 20 hours must be participatory learning).
- Five pieces of [practice-related feedback](#) over the three years prior to the renewal of your registration. These can be from Friends and Family Test results, incident and investigation reports, complaints and responses to complaints, compliments and the Trust preceptorship, appraisal and supervision process. The NMC has confirmed that feedback received within appraisals can be used towards the five pieces of practice related feedback.
- Five [written reflective accounts](#) on what you have learnt from your CPD, practice related feedback or an event or experience in your practice, and explain how this is relevant to the Code.
- Evidence of a [reflective discussion](#) with another NMC-registered nurse.
- Declaration of [health and character declaration](#), including any cautions or convictions
- Declaration of Professional indemnity arrangements

It is the responsibility of the registrant to ensure that they have professional indemnity arrangements in place. All nurses employed by the Trust, including those working on the bank are provided with professional indemnity arrangements as part of their employment.

For bank staff this only applies to hours worked for the Trust and not those worked elsewhere.

The updated policy is at the following link:

<http://staff.sussexpartnership.nhs.uk/policies-documents-and-forms/documents/documents-library/4177-2017-2018-indemnity-certificate>

- [Confirmation](#) by a Third party that the registrant has complied with the revalidation requirements.

For Bank nurses, the above requirements for practice hours, CPD, practice-related feedback, written reflective accounts should be discussed with the Senior Nurses from the relevant CDS, Teams or Wards you regularly work with.

Full guidance on the NMC evidence requirements can be found at their website [here](#). The NMC website also contains 'best practice' examples on how to complete the required templates.

It is the NMC registrant's responsibility to ensure their evidence of meeting these requirements is kept in a portfolio but this is OPTIONAL and not mandatory. The final set of submitted revalidation paperwork can be uploaded to My Learning.

2.2 Supporting Nurses with protected characteristic under the Equality Act 2010

The NMC advises that any nurse who is having difficulty completing the revalidation process, due to a protected characteristic under the Equality Act 2010 (e.g. dyslexia) should contact the NMC directly so they can assist them with their renewal. If any member of staff has been assessed as having difficulties, support should already be in place to enable them to undertake their current role.

2.3 Insufficient supporting evidence

If the confirmer is not satisfied that the portfolio is adequate to inform the confidential revalidation discussion, the confirmer will discuss this with the registrant. The registrant will be given an opportunity to revise or supplement the content of the portfolio; if the registrant is uncertain about what supporting evidence to include, advice should be obtained without delay from their relevant line manager or the NMC.

If the portfolio remains insufficient, despite efforts to support the registrant being revalidated by providing them with advice and information, the confirmer should contact their Care Delivery Service, Team Manager or Ward Senior Nurse for advice who may contact the Chief Nurse.

2.4 Postponement or deferral of appraisal supporting revalidation

It is the expectation and responsibility of all nurses to participate in their annual appraisal process as it is a contractual obligation.

There are, however, [exceptional circumstances](#) when a registrant may make a request to their line manager for deferment due to the following:

- Breaks in practice due to sickness or maternity leave.

- Breaks in practice due to absence abroad or sabbaticals.
- Breaks in practice due to suspension from clinical work as a result of the registrant being investigated into concerns over his/her performance or behaviour.

Each case will be dealt with on its merits and the Trust is mindful that no registrant must be disadvantaged or unfairly penalised as a result of pregnancy, sickness or disability. However, nurses who for reasons above are not ready to make their revalidation submission, should contact the NMC directly for advice at the earliest opportunity.

2.5 Addressing concerns

Revalidation is not a substitute or replacement for fitness to practice and any issues of competence should not be identified through the revalidation process. The Trust has a responsibility to deal with performance issues as they arise, and through the Trust [Preceptorship Policy](#) , [Supervision policy](#), [Appraisal Policy](#) and the [Capability policy](#).

2.6 Lapsed registration

Nurses who [fail to renew their registration](#) on time will be removed from the NMC register immediately and will have to go through a formal process of readmission, which takes up to six weeks to complete. In this interim period, nurses will not be permitted to work as a qualified nurse. This is because they are legally required to be on the NMC register in order to practise.

While waiting for this process to be completed, you may be asked to take leave or if you continue to work, be paid as a support worker until your registration is renewed.

3 Roles and Responsibilities

3.1 Chief Nurse

The Chief Nurse is nominated by the Board as the Executive Lead with the responsibility for the nursing workforce, and the development and implementation of this policy.

3.2 All Managers

All Managers must ensure they are aware of the content of this policy so as to support their nurses to collect evidence for revalidation and undertake reflective discussion and confirmation.

3.3 Senior Nurses with the CDS/Teams/Wards

Senior Nurses must ensure they are aware of this policy and the requirements for them to advise, facilitate and support reflective discussions and as appropriate confirmation for nursing staff within their CDS, teams and wards.

3.4 SPFT Nurses

It is the responsibility and a requirement of all registered nurses and nursing associate employed by SPFT to follow the processes laid out in this policy and by the NMC and to ensure they meet their contractual requirements by maintaining their registration where this is a requirement of their role. The registrant must inform their line manager once they have completed their revalidation but also if they are anticipating any difficulties in successfully completing the process

3.5 Nurses on the Temporary Staffing Register / Bank

The responsibility and requirement for those working on the Bank is similar to SPFT nurses. The Senior Nurses from the relevant CDS, Teams or Wards where they regularly work should be able to advice and support bank staff with the revalidation process.

4 Quality Assurance

Each appraiser and confirmer will be supported as much as possible in their role by being provided with on-going training and support via the Trusts My Learning site. It is vital for the Trust to have assurance that appraisers and confirmers are consistent, fair and understand their role in the revalidation process.

4.1 Records and confidentiality

All information relating to appraisal and revalidation should be maintained according to the Trust's [Data Protection & Confidentiality Policy](#), [IT and Information Security Policy](#) and [Corporate Records Management Policy](#).

5 Monitoring

The Deputy Chief Nurse will monitor the effectiveness of the policy to support the revalidation processes, audit and update the policy in order to ensure compliance with current regulations, legislation and guidance.

6 Development, consultation and ratification

The development of this policy and guidance has been informed by the changes in the requirements to comply with legislation and NMC guidelines for nursing and midwifery revalidation. A range of stakeholders – including the Chief Nurse, Deputy Chief Nurses, corporate services leads, staff side representatives, professional leads, consultant nurses, matrons and registered nurses have been consulted and offered the opportunity to shape and influence this policy and guidance. This policy and guidance has been ratified by the Clinical Policy Forum.

7 Equality and Human Rights Impact Assessment (EHRIA)

This policy complies with the Equality Act 2010 and the European Convention on Human Rights and has undergone an equality and human rights impact analysis.

8 Document Control including Archive Arrangements

It will be the responsibility of the Sponsor and Author of this policy document to ensure that it is kept up to date with any local or national policy, or legislation. The policy will be managed in accordance with the Policy for Procedural Documents.

9 Reference Documents

- Appraisal Policy
- Capability Policy
- Disciplinary Policy and Procedure
- Preceptorship Policy
- Supervision Policy
- Confidentiality Policy
- IT and Information Security Policy
- Corporate Records Management Policy
- NMC, (2015). The Code for Nurses and Midwives: <http://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/revise-new-nmc-code.pdf>
- NMC, (2015). How to Revalidate with the NMC: <http://www.nmc.org.uk/globalassets/sitedocuments/revalidation/how-to-revalidate-booklet.pdf>
- Nursing & Midwifery Council (2015) *Professional Indemnity Arrangement Factsheet*

- Nursing & Midwifery Council (2015) *Information for Confirmers*
<http://revalidation.nmc.org.uk/information-for-confirmers>
- Nursing & Midwifery Council (2015:7-9) *Revalidation Employer's Guide to Revalidation*
<http://www.nmc.org.uk/globalassets/sitedocuments/revalidation/employers-guide-to-revalidation.pdf>

Appendix A – Guidance for managers for staff with expired professional registration

Managers should have their own professional registration checking system; they will also have access to the alert system on their e rostering informing them of their staff NMC Pin renewal date as well as any lapsed registration. In cases where there is a lapsed registration, the manager will also be contacted by their HRBP (HR Business Partner) or HRSA (HR Senior Advisor) to inform them of the lapse and to try to establish the facts around the expired registration. The manager will also receive advice from Human Resources on how to progress the case.

Further to this discussion, if the registration has indeed expired, the manager of the individual member of staff should arrange to meet with them or ring them to immediately notify them that their registration number has expired and to speak to them about how this has occurred.

The individual should be informed that the Trust is aware that the registration number has expired and they have been practising as an unregistered member of staff. The individual should be offered an opportunity to explain the reasons for their expired registration.

The following considerations should be discussed:

- Length of lapsed registration
- Was the individual aware that their registration had lapsed prior to the meeting
- Had any previous contact been made by either, the manager, HR, the professional body

Having given due consideration to all of the evidence, the manager along with advice from the HR department should assess the suitability of continuation of employment in the qualified role. The member of staff should be informed of the intended action that will be taken by the Trust.

This may include one or more of the following:

- Putting measures in place to reduce any potential risk, including the restriction of scope of duties e.g. working in an unqualified role (this option will attract reduction in pay for the period the member of staff in unregistered);
- Redeployment to an alternative role/location (this option would attract the pay for the particular post being fulfilled);
- Granting of annual leave or unpaid leave in order to make arrangements to re-register;

- Formal/Informal action under the Trust's Disciplinary Procedure which may include suspension from duty and which could ultimately result in the issuing of formal warnings or dismissal.

All actions/discussions between employee and line manager must be documented in writing from the Departmental Head or line manager and sent to the employee and a copy placed on the employee's HR file.