NMC Revalidation: FAQs

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Introduction

Every nurse who wants to stay on the register and legally be able to work in the UK, must revalidate from April 2016, when they come to re-register. There is a lot of confusion about what this means for nurses and what's involved. The Nursing and Midwifery Council are still fine tuning some of the details, but if you are due to revalidate or have to have nursing staff who are due to revalidate at the end of this year or beginning of 2016, it’s best to get prepared. So we’ve put together this handy guide to help you get ready for revalidation.

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Editor, Nursing Times

Keep up to date on the latest news and updates on revalidation at: nursingtimes.net/nursing-practice/revalidation
Why is the NMC introducing revalidation?

The idea behind revalidation – keeping nurses’ practice up-to-date – is nothing new. However, there were concerns that the previous system, PREP, was not effectively monitored. The new system includes an additional level of monitoring as every nurse will need to be signed off by their manager or someone in a similar position.

Revalidation was a key recommendation from the Francis inquiry into failures of care at Mid Staffordshire Foundation Trust. It aims to prevent future scandals by improving patient safety and ensuring nurses are all providing care that meets an acceptable standard.

It will mean nurses need to do more to remain on the Nursing and Midwifery Council register. The number of hours of required continuing professional development is increasing from 35 hours in three years to 40.

Nurses will need to obtain five pieces of practice related feedback. This can be formal or informal, written or verbal; and you will need to complete five written reflections on the NMC code and discuss this with another registrant.

Whereas in the past, nurses were asked to confirm that they had undertaken CPD in order to re-register, this was only checked if a nurse was subject to an NMC spot-check. Under the new revalidation system, every nurse will need to provide evidence that they have met the standards to their manager.

How has the NMC developed the revalidation model?

In August, the NMC completed a six-month public consultation on revalidation and revising the code of conduct. This was run by independent companies and involved two online surveys, workshops and focus groups. The NMC also held five stakeholder summits and other engagement activities across the UK which were attended by nurses, midwives, employers, leaders, educators and representatives.

The NMC then published an evidence review based on the consultation findings and drew up a draft revalidation policy for piloting. Pilots started in January 2015.

Will revalidation be the same for nurses and midwives?

All nurses and midwives will need to comply, so all nursing and midwifery students who qualify after April 2016 will need to understand the new requirements.

Nurses and midwives who do not comply will no longer be registered.

What sort of activities count as continuing professional development?

Revalidation means you will need to have undertaken 40 hours of CPD within the past three years to re-register with the NMC.

The NMC has stated that there is no such thing as “approved activity” to count towards this CPD requirement, however it is important to remember that it should be relevant to your practice or may not be counted: don’t do something in your learning that you won’t do in practice.

CPD could include completing online learning units, reading a clinical article and doing a piece on reflective practice on it within your team, submitting an awards entry, or attending an educational event, conference or training seminar.

You must maintain a professional profile of this activity to show your employer (or the person who will sign you off) at re-registration.
How will the NMC check that the revalidation model works?

The NMC has pledged to engage extensively with those affected by the model to ensure it is effective and workable. It will be consulting on its model of revalidation throughout the pilots, and would like to hear from nurses and midwives who work in a range of employment settings, as well as patient and public groups.

The model of feedback is being used by other regulated professionals and has been further supported by recent enquiries and recommendations to the NMC (such as those included in the Francis report).

When does revalidation start?

From April 2016, all nurses and midwives who are due to re-register at that point or from then on will start using revalidation. This means that by April 2019, everyone on the register would have undergone revalidation.

In spring 2015, the Revalidation Pilot Project will test revalidation operationally with a selected few sites before it applies to all those on the register from April 2016 onwards.

Draft NMC guidance specific to revalidation has been released and more details will be available in June after these pilot sites have given feedback and gone through the process.

The NMC is now consulting on how revalidation can work in practice to inform the development of its guidance prior to publication.

What is the difference between revalidation and re-registration?

Revalidation will be the process by which registered nurses and midwives will demonstrate to the NMC that they continue to remain fit to practise. Revalidation will take place every three years at the point of renewal of registration.

What will I have to do to revalidate?

Nurses and midwives will have ownership of, and will be held accountable for, their own revalidation process. Every three years at the point where they have to renew their registration, nurses and midwives will need to demonstrate to the NMC that they continue to remain fit to practise in order to remain on the register and able to work in the UK.

A nurse or midwife will be required to declare they have practised for 450 hours during the last three years and completed the required amount of continuing professional development (CPD), which is thought to increase from 35 hours over three years to 40 hours over the same period.

Revalidation will also require nurses and midwives to obtain confirmation from a third party on their continuing fitness to practise. This will come from someone well placed to comment on a nurse or midwife’s practice based on the requirements in the Code, usually a line manager and, where possible, a registrant.

Nurses and midwives will need to show as well how they are using practice related feedback from patients, colleagues and others to improve their standards of care.

From April 2019, all nurses and midwives who are due to re-register will then start using revalidation. This means that by April 2016, everyone on the register would have undergone revalidation.
Who will approve my revalidation?

Confirmation is received from someone well placed to comment on a nurse or midwife’s practice. This will confirm that a nurse or midwife is performing to the standards set out in the Code and it will be based on information available at the time.

What happens if I fail my revalidation?

Nurses and midwives have to pass revalidation or they will fail to be registered to legally work in the UK in their profession. Nurses and midwives should be collecting the evidence to support their revalidation throughout the three years, and discussing it with their employer at appraisal, so should be aware before the revalidation date if they have or haven’t met the NMC’s requirements.

How will the NMC check that nurses and midwives have fulfilled their requirements for revalidation?

The Nursing and Midwifery Council will rely on employers to verify that every nurse and midwife:

• Continues to remain fit to practise;
• Have met the requirements for practice and continuing professional development;
• Have sought and received third party feedback which has informed their reflection on their practice. This feedback could be from patients, carers, students (for educators) or peers;
• Have sought and received third party confirmation that they are fit to practise. A third party (likely to be a manager, another registrant or a supervisor) will need to confirm that the nurse or midwife is adhering to the Code and standards, and is fit to practise.

The NMC will not personally be able to check every portfolio of evidence, just as it doesn’t now with PREP requirements. The profession is expected to uphold these standards themselves.

What has changed in the new NMC Code?

Prioritise people, practise effectively, preserve safety and promote professionalism are the four “statements” of the revised Nursing and Midwifery Council code of conduct, which aims to improve standards of patient care.

The code will be central to practice, and will govern how patients are treated with dignity and respect as well as clinical competence. Specifically, it features new instructions including to treat people with compassion and to ensure the physical, social and psychological needs of people are assessed and to exercise candour when any errors or harm have occurred.

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