Revalidation: taking away the fear factor

Plenty of scare stories surrounded the NMC’s release of its new revalidation requirements, with anything from excessive practice hours and patient feedback making many nurses uneasy about their future registration. Here, Alex Munro takes a look at the facts...

As a nurse or midwife, you will no doubt be aware of the impending changes to the way that you will have to renew your professional registration with the NMC. So what are the changes and what will they mean for you?

Over the past few years there has been much discussion about changes to the way nurses and midwives are professionally regulated. One of the recommendations to emerge from the inquiry into failings in care at Mid Staffordshire NHS Foundation Trust was that there should be more scrutiny of the way the NMC assesses its members, increasing the organisation’s role in protecting the public.

Revalidation will replace the current process of post-registration education and practice (PREP), and self-declaration. It will become a compulsory element of nurse registration next year and will require a third party to confirm that a nurse or midwife has met the revalidation requirements.

The NMC’s revalidation pilots are now complete and the feedback from 2,700 participants is being reviewed to refine the system and supporting guidance before launch.

Along with 18 other healthcare organisations from across the UK, Hallam Medical worked with the NMC to capture a large cross-section of nurses and midwives from all backgrounds — not just those involved in direct patient contact — to take part in the pilot. The pilot essentially involved the NMC running the revalidation process with these nurses and midwives in what was effectively a trial run. The feedback and success of the pilot is due to be announced in October 2015.

Despite all the press coverage and talk of the impending changes, many nurses and midwives are still unsure of what revalidation actually involves and what it will mean for them. Change inevitably brings about uncertainty, fear of the unknown and anxiety about being given extra work on top of an already-busy day job.

Hopefully this article will alleviate some of those concerns and by highlighting the changes will actually show that the new system is not too different from what you are doing already.

REVALIDATION REQUIREMENTS FOR NURSES AND MIDWIVES

For nurses and midwives reregistering with the NMC, revalidation requires evidence that they have fulfilled a set of minimum criteria over a three-year period (see Table 1). For some of you, these criteria may seem challenging, whereas others will find them easily achievable.

Professional practice hours

Over a three-year period you will have to provide evidence that you have worked in a professional capacity for a minimum of 450 hours; or put another way, 150 hours a year or 12.5 hours a month. If you are dual-qualified (i.e. a registered nurse and midwife) then you will have to provide evidence that you have worked a total of 900 hours over three years (450 hours per role).

You can prove that you have worked these hours by supplying a list of shifts with the relevant dates, for instance — templates will be made readily available to make recording this as simple as possible.

Continuous professional development (CPD)

Under the new rules you will have to show that you have carried out a list of shifts with the relevant dates, for instance — templates will be made readily available to make recording this as simple as possible.

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<th>Table 1: New revalidation requirements</th>
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<td>450 hours of professional practice (900 if dual-registered)</td>
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<td>40 hours of CPD: 20 of these hours must be participatory (i.e. study days, workshops etc)</td>
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<tr>
<td>Feedback, reflective accounts and discussion</td>
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<td>Professional indemnity insurance</td>
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<td>Health and character declaration</td>
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<td>Third-party confirmation</td>
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40 hours of CPD, 20 of which must be participatory (currently, PREP requires 35 hours). CPD doesn’t have to include formal training, but can be any activity which allows you to review and improve your practice. For example, reading a professional journal, reflecting upon what it says in relation to your practice and then sharing this with colleagues can count as CPD.

Basically, anything that involves you further developing your practice is admissible as evidence of CPD. Similar to PREP, any mandatory training will not be recorded as CPD.

Practice feedback and reflective accounts
Currently, feedback from patients or colleagues is not a requirement of PREP, but going forward the NMC will require all nurses and midwives to provide five pieces of practice feedback accompanied by five reflective accounts, which it is hoped will improve practice.

This feedback can be either verbal or written and can include audit results from your documentation; telephone assessments; teaching sessions you have performed; policies you have written; or anything else relevant to your practice. Each reflective account can be about an instance of CPD or feedback, or a combination of both. For instance, you could create a reflective account around a particular topic which may have arisen through some feedback your team received — such as consent and confidentiality — and identify how that relates to the code of conduct.

Obtaining feedback will be the responsibility of the individual nurse or midwife, but tools and templates to help with this are available on the NMC website. They don’t need to be lengthy, academic essays, rather a concise and practical piece to show what you are learning about your practice and how you think you can make improvements.

Professional indemnity insurance
As a practising nurse or midwife, whether employed or self-employed, you will be required to prove that you have made provision for professional indemnity insurance. If you are employed, your employer should be able to provide you with this; alternatively, and particularly in the case of agency staff, your union or professional membership (UNISON, RCN, etc) often includes professional indemnity insurance.

Willing to learn: nurses will need to make sure they are aware of the new NMC revalidation criteria from October this year.

Health and character declaration
You will be expected to provide a health declaration, which must also include any cautions or convictions.

Third-party confirmation
Under revalidation, you will need to demonstrate to a third party that you have met the revalidation requirements. This will mean having a confirmation discussion with the third party where you demonstrate how you have met the revalidation requirements. This can form part of an annual appraisal.

Your line manager would be an appropriate third-party confirmer and the NMC recommends that you obtain confirmation from this person wherever possible. A line manager does not have to be an NMC registered nurse or midwife. If you do not have a line manager, the NMC recommends that the third party should be an NMC-registered nurse or midwife. Failing that, you can seek confirmation from another healthcare professional that you work with and who is regulated in the UK.

Professional development discussion
A new and really valuable feature of
Table 2: PREP versus revalidation: the different requirements

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<td>Five additional hours of CPD</td>
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<td>All revalidation submissions must be sent via your NMC online account</td>
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<td>Five feedback and five reflective pieces</td>
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<td>Proof of professional indemnity insurance</td>
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<td>Third-party confirmation</td>
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revalidation will be discussing your written reflections with another NMC-registered nurse or midwife as part of a professional development discussion. If your confirmer is another NMC registrant, then you can also discuss your reflective accounts with them. If your confirmer is not another NMC registrant then you will need to have this discussion with another NMC registrant and do so before your confirmation discussion.

DIFFERENCES BETWEEN PREP AND THE NEW PROCESS

Whereas PREP relies entirely on you honestly representing your professional achievements, revalidation requires third-party confirmation that you are meeting the standards. Table 2 highlights the main differences between PREP and revalidation.

FREQUENTLY ASKED QUESTIONS

As, Hallam Medical’s clinical director, I have been travelling the country talking to nurses about nurse revalidation at JCN Roadshows. These interactive sessions have been well received by community nurses hoping to gain an understanding of the changes. Below are some of the questions I have frequently been asked during these sessions.

How do I maintain my portfolio?
Tools, templates and guidelines are available from the NMC to help you maintain a portfolio of evidence which will be checked by your confirmer at appraisal (and possibly the NMC). You can either save your portfolio within a folder or keep an e-portfolio online; the latter having the advantage that if the NMC requests to see your portfolio, you can scan and send it electronically. Hallam Medical and the JCN are currently looking into the creation of e-folders to hold this information.

How do I find a third-party confirmer?
This will typically be your line manager or supervisor. However, the NMC will produce further information on confirmation but not specific guidance for different settings, i.e. in the case of lone workers and/or isolated practice nurses who may have to link across other services/surgeries to have their portfolio confirmed.

How do I submit my portfolio to the NMC?
You will need to set up an NMC online account to create and submit your portfolio — to help with this, an online guide is available from the NMC website, which shows you how to get started. The online account gives you additional benefits such as the ability to view your registration status and renewal date; maintain your contact details; pay your annual fee; and print statements of entry (visit www.nmc.org.uk/registration/nmc-online for more information).

As a confirmer, what training will I need?
The NMC will be publishing a range of training materials as well as sharing feedback from the revalidation pilot on how to review a portfolio and undertake an appraisal. Check the NMC revalidation website regularly for updates (www.nmc.org.uk/standards/revalidation/learning-training-and-sharing-good-practice).

When do I need to start preparing my portfolio?
In October 2015, the NMC council is expected to give the go-ahead to launch revalidation. From this point you will need to familiarise yourself with the requirements and start to develop your portfolio. In order to provide a reasonable amount of time for familiarisation, the NMC has proposed that the first nurses and midwives to revalidate will be those whose three-year renewal date begins in April 2016.

The NMC and its pilot organisations are working hard to get this right, primarily by giving you the right tools, information and support to understand what is happening and when. It is hoped that this will remove the ‘fear factor’ and ensure you are fully prepared.

There are already template documents available on the NMC website and employers are putting their own processes in place as well. So, get ahead of the game, keep informed and start building your portfolio. I will be presenting at future JCN Roadshows (www.jcn.co.uk/events), so why not attend the revalidation session while you are there?

Find out more...

Keep up to date with the latest revalidation news as well as any feedback from the pilot scheme with the following websites:
- www.nmc.org.uk
- www.jcn.co.uk
- www.hallammedical.com