

REVALIDATION

NMC Nursing &
Midwifery
Council



How to revalidate with the NMC
Requirements for renewing your registration

CONTENTS

WHAT DOES THIS DOCUMENT DO?	3
WHAT IS REVALIDATION?	5
CHECKLIST OF REQUIREMENTS AND SUPPORTING EVIDENCE	7
THE REVALIDATION PROCESS	9
HOW TO APPROACH REVALIDATION	10
PRACTICE HOURS	12
CONTINUING PROFESSIONAL DEVELOPMENT	16
PRACTICE-RELATED FEEDBACK	18
WRITTEN REFLECTIVE ACCOUNTS	20
REFLECTIVE DISCUSSION.....	22
HEALTH AND CHARACTER.....	24
PROFESSIONAL INDEMNITY ARRANGEMENT.....	26
CONFIRMATION	28
THE APPLICATION PROCESS.....	31
VERIFICATION OF YOUR APPLICATION	34
REVALIDATION AND NMC FITNESS TO PRACTISE PROCESSES	36
CANCELLING YOUR REGISTRATION.....	37
GUIDANCE SHEET 1: GUIDANCE ON NON-IDENTIFIABLE INFORMATION	39
GUIDANCE SHEET 2: PRACTICE HOURS REQUIREMENTS.....	42
GUIDANCE SHEET 3: EXAMPLES OF CPD ACTIVITIES.....	44
FORMS AND TEMPLATES	46

WHAT DOES THIS

DOCUMENT DO?

This document is for nurses and midwives who are registered with the NMC. It sets out how to renew your registration with the NMC through revalidation every three years.

The requirements for revalidation are either prescribed in the Nursing and Midwifery Order 2001 (the Order)¹ and the Education, Registration and Registration Appeals Rules (the Rules)², or are standards set by the NMC for revalidation and readmission.³

These requirements are effective from April 2016 and replace the requirements for renewal set out in the Prep (Post Registration Education and Practice Standards) handbook.⁴

About the NMC

The Nursing and Midwifery Council exists to protect the public. We do this by making sure that only those who meet our requirements are allowed to practise as a registered nurse or midwife in the UK.

We take action if concerns are raised about whether a registered nurse or midwife is fit to practise.



How to use this document

Please note that you must still pay your annual fee every year to retain your registration with the NMC. Revalidation replaces the current Prep renewal process and you will have to complete the revalidation process every three years in order to renew your registration.

This document gives an overview of the revalidation process and sets out our recommendations for how you approach the process and collect the required information.

It includes a checklist of the revalidation requirements and the supporting evidence for each requirement.

On pages 12 to 30 we set out details of each requirement. After each requirement we provide further information to help you understand and meet the requirement. This information will set out:

- the purpose of the requirement;
- how you can comply with the requirement;
- our recommended approach to collecting and recording the required information, and
- how to demonstrate to us that you have met the requirement in your online application.

You should read this document in conjunction with the Code⁵ and other guidance on our website. We have also published a range of resources that you might find helpful in preparing for revalidation, including completed templates and case studies. We have also provided information for confirmers, which you should ensure that your confirmer has read, as well as information for employers, which we recommend you encourage your employer (if appropriate) to read.

How the NMC will use your information

As part of the revalidation process you are required to submit information about yourself to the NMC. We will only process your personal data, as permitted by the Data Protection Act 1998 ('DPA').



Details of our data protection policy are included in our privacy notice at:
www.nmc.org.uk/privacy

We will use your personal data for the purposes of administering and assessing your revalidation application and any subsequent verification of that application. We may also use information obtained through the revalidation process for research and for the purpose of maintaining and improving our internal systems and processes.

If there are grounds for believing that you have made a false declaration as part of your revalidation application, information supplied by you may be used to investigate any alleged breach of the Code and for the purpose of any subsequent fitness to practise proceedings.

How to contact the NMC

For more information please see the revalidation section of the NMC website at: www.nmc.org.uk/standards/revalidation. If you are unable to find the information you need and you still require further help you can email us at: revalidation@nmc-uk.org.

If you wish to make a complaint about the standard of our service, please visit the 'Contact us' pages of our website at: www.nmc.org.uk/contact-us/complaints-about-us.

WHAT IS REVALIDATION?

Revalidation

- is the process that allows you to maintain your registration with the NMC;
- builds on existing renewal requirements;
- demonstrates your continued ability to practise safely and effectively, and
- is a continuous process that you will engage with throughout your career.

Revalidation is the responsibility of nurses and midwives themselves. You are the owner of your own revalidation process.

Revalidation is not

- an assessment of a nurse or midwife's fitness to practise;
- a new way to raise fitness to practise concerns (any concerns about a nurse or midwife's practice will continue to be raised through the existing fitness to practise process), or
- an assessment against the requirements of your current/former employment.

Why we are introducing revalidation

- to raise awareness of the Code and professional standards expected of nurses and midwives;
- to provide you with the opportunity to reflect on the role of the Code in your practice as a nurse or midwife and demonstrate that you are 'living' these standards;
- to encourage you to stay up to date in your professional practice by developing new skills and understanding the changing needs of the public and fellow healthcare professionals;
- to encourage a culture of sharing, reflection and improvement;
- to encourage you to engage in professional networks and discussions about your practice, and
- to strengthen public confidence in the nursing and midwifery professions.

Revalidation and the Code

One of the main strengths of revalidation is that it reinforces the Code by asking nurses and midwives to use it as the reference point for all the requirements, including their written reflective accounts and reflective discussion.

This should highlight the Code's central role in the nursing and midwifery professions and encourage nurses and midwives to consider how it applies in their everyday practice.

The Code (paragraph 22) requires you to fulfil all registration requirements.

To achieve this you must:

- meet any reasonable requests so we can oversee the registration process (22.1);
- keep to our prescribed hours of practice and carry out continuing professional development activities (22.2), and
- keep your knowledge and skills up to date, taking part in appropriate and regular learning and professional development activities that aim to maintain and develop your competence and improve your performance (22.3).

Overall, revalidation should lead to improved practice and therefore public protection benefits.



CHECKLIST OF REQUIREMENTS

AND SUPPORTING EVIDENCE

These are all of the requirements that you must meet in order to complete your revalidation and renew your registration every three years with the NMC.

Requirements	Supporting evidence
450 practice hours or 900 hours if revalidating as both nurse and midwife	Maintain a record of practice hours you have completed, including: <ul style="list-style-type: none">• dates of practice;• the number of hours you undertook;• name, address and postcode of the organisation;• scope of practice (see tip box on page 8);• work setting (see tip box on page 8);• a description of the work you undertook, and• evidence of those practice hours (such as timesheets, role profiles or job specifications).
35 hours of continuing professional development (of which 20 must be participatory)	Maintain accurate and verifiable records of your CPD activities, including: <ul style="list-style-type: none">• the CPD method (examples of 'CPD method' are self-learning, online learning, course);• a brief description of the topic and how it relates to your practice;• dates the CPD activity was undertaken;• the number of hours and participatory hours;• identification of the part of the Code most relevant to the CPD, and• evidence of the CPD activity (Guidance Sheet 3 provides examples of the kind of evidence you can record, see pages 44-45).
Five pieces of practice-related feedback	Notes of the content of the feedback and how you used it to improve your practice. This will be helpful for you to use when you are preparing your reflective accounts. Make sure your notes do not include any personal data (see Guidance Sheet 1 on pages 39-41).

Requirements	Supporting evidence
Five written reflective accounts	Five written reflective accounts that explain what you learnt from your CPD activity and/or feedback and/or an event or experience in your practice, how you changed or improved your work as a result, and how this is relevant to the Code. You must use the NMC form on page 46 and make sure your accounts do not include any personal data (see Guidance sheet 1).
Reflective discussion	A reflective discussion form which includes the name and NMC Pin number of the NMC-registered nurse or midwife that you had the discussion with as well as the date you had the discussion. You must use the NMC form on page 47 and make sure the discussion summary section does not contain any personal data (see Guidance sheet 1).
Health and character	You will make these declarations as part of your online revalidation application.
Professional indemnity arrangement	Evidence to demonstrate that you have an appropriate indemnity arrangement in place. Whether your indemnity arrangement is through your employer, membership of a professional body or through a private insurance arrangement. If your indemnity arrangement is provided through membership of a professional body or a private insurance arrangement, you will need to record the name of the professional body or provider.
Confirmation	A confirmation form signed by your confirmer. You must use the NMC form on pages 48-50.



Scope of practice

Direct clinical care or management: adult and general care nursing; children's and neo-natal nursing; mental health nursing; learning disabilities nursing; midwifery; health visiting; occupational health; school nursing; public health; other.

Commissioning, Education, Policy, Quality assurance or inspection, Research, Other.

Work setting

Ambulance service, Care home sector, Community setting (including district nursing and community psychiatric nursing), Consultancy, Cosmetic or aesthetic sector, Governing body or other leadership, GP practice or other primary care, Hospital or other secondary care, Inspectorate or regulator, Insurance or legal, Maternity unit or birth centre, Military, Occupational health, Police, Policy organisation, Prison, Private domestic setting, Public health organisation, School, Specialist or other tertiary care including hospice, Telephone or e-health advice, Trade union or professional body, University or other research facility, Voluntary or charity sector, Other.

THE REVALIDATION PROCESS

Over three years since your last renewal/you joined the register

You need to meet a range of revalidation requirements designed to show that you are keeping up to date and maintaining safe and effective practice



See pages 12–30: details of the requirements

In 12 months up to your renewal date

Once you have met the requirements, you will need to discuss your revalidation with a confirmer. As part of this confirmation discussion, you will demonstrate that you have complied with all of the revalidation requirements, except professional indemnity arrangement and health and character.



See pages 28–30: 'Confirmation'

At least 60 days before your revalidation application date

Every three years you will be asked to apply for revalidation using NMC Online. We will notify you at least 60 days before your application is due, either by email if you have set up an NMC Online account, or by letter sent to your registered address.



See pages 31–33: 'The application process'

In the 60 days before your revalidation application date

Once you receive your notification you will need to go online and complete the application form. As part of that application, you need to declare to the NMC that you have complied with the revalidation requirements.



See pages 31–33: 'The application process'

Following submission of your revalidation application

Each year we will select a sample of nurses and midwives to provide us with further information to verify the declarations they made as part of their revalidation application. If you are selected your registration will not be renewed until this process is completed.



See pages 34–35: 'Verification of your application'

HOW TO APPROACH

REVALIDATION

Understand key terms

1. **The registration process:** Every three years from when you join (or re-join) the register you will need to renew your registration by revalidating. Every year you will also need to retain your registration by paying an annual fee. If you don't complete these processes on time your registration will expire.
2. **Fee expiry date:** The deadline for paying your annual fee in order to retain your registration.
3. **Revalidation application date:** The deadline for submitting your revalidation application. It is the first day of the month in which your registration expires, so if your renewal date is 30 April, your revalidation application date will be 1 April.
4. **Renewal date:** The date on which your registration will be renewed if you have successfully completed your revalidation application. It is the last day of the month in which your registration expires.

Keep a portfolio

5. We strongly recommend that you keep evidence that you have met the revalidation requirements in a portfolio. This does not necessarily need to be an e-portfolio; please see our guidance sheet on e-portfolios at www.nmc.org.uk/revalidation/revalidation-guidance-and-resources/ for further information.
6. We expect any evidence to be kept in English, and nurses and midwives must submit their revalidation application, and any subsequent verification information, in English.



The NMC recognises the culture and linguistic needs of the Welsh speaking public. We have published Welsh language versions of our guidance for nurses and midwives, confirmers and employers, as well as our templates and forms, on our website. www.nmc.org.uk/about-us/our-equality-and-diversity-commitments/welsh-language-scheme/

7. The portfolio will be helpful for the discussion you have with your confirmer (see pages 28-30). You will also need to have this information available in case we request to see it to verify the declarations you made as part of your application (see pages 34-35).
8. You may already keep a professional portfolio. If so, you do not need to maintain a separate portfolio.

9. You can use the checklist on page 7 to make sure that all of the information is in your portfolio before you have your confirmation discussion with your confirmer or submit your revalidation application.
10. We recommend that you keep your portfolio until after your next revalidation. For example, if you revalidate in 2016, we suggest that you should keep your portfolio until after you have revalidated again in 2019.
11. Your portfolio must not record any information that might identify an individual, whether that individual is alive or deceased. This means that all information must be recorded in a way that no patient, service user, colleague or other individual can be identified from the information. Guidance Sheet 1 on pages 39–41 provides guidance on how to make sure that your portfolio does not contain any information that might identify an individual.

Conflicts of interest and perceptions of bias

12. You need to be mindful about any personal or commercial relationship between you, your confirmer and your reflective discussion partner. It would not be appropriate for a family member or person with whom you have a close personal relationship to undertake those roles. You will need to decide whether there is any conflict of interest or perception of bias to ensure that the confirmation process and reflective discussion retains credibility and remains objective. In some cases you might decide to use a different person as your confirmer and reflective discussion partner. The responsibility for this lies with you, your confirmer and reflective discussion partner.

Appraisals

13. Many nurses and midwives have an employer. It is important for their employers to be aware of the Code and the standards expected of registered nurses and midwives in their professional practice.
14. Appraisals are a way for employers to assess the performance of their employees against the requirements of their role and identify areas for improvement and development.
15. The revalidation process is designed so that it can be undertaken as part of a regular appraisal. If you are an employee who does not have a regular appraisal you could consider asking your employer to arrange an appraisal for you in advance of your revalidation application date.
16. We strongly recommend that, where possible, your confirmation discussion forms part of an annual appraisal, if you have one.
17. If your line manager is an NMC-registered nurse or midwife, you might like to have both your reflective discussion and your confirmation discussion as part of an annual appraisal, if you have one.
18. You might find it helpful to have a discussion with your confirmer every year as part of an annual appraisal, so that you can keep them updated on your revalidation.
19. If you are not an employee, or if you are an employee who has been unable to arrange an appraisal in advance of your revalidation application date, you will still be able to renew your registration by meeting the revalidation requirements. You are not required to arrange for another person or organisation to conduct an appraisal for the purposes of revalidation, but you will still need to arrange your reflective and confirmation discussions.

PRACTICE HOURS

The requirements

20. You must have practised for a minimum number of hours over the three year period since your registration was last renewed or you joined the register.⁶

Registration	Minimum total practice hours required
Nurse	450 practice hours required
Midwife	450 practice hours required
Nurse and SCPHN (Nurse/SCPHN)	450 practice hours required
Midwife and SCPHN (Midwife/SCPHN)	450 practice hours required
Nurse and midwife (including Nurse/SCPHN and Midwife/SCPHN)	900 practice hours required (to include 450 hours for nursing, 450 hours for midwifery)



A specialist community public health nurse (SCPHN) means a registered nurse or midwife who is also registered in the Specialist Community Public Health Nurses' part of the register.

21. If you have practised for fewer than the required number of hours in the three year period since your registration was last renewed or you joined the register, then you must successfully complete an appropriate return to practice programme approved by the NMC before the date of your application for renewal of registration.⁷
22. If you are practising as a midwife in the UK, you must file an Intention to Practise (ItP) form annually with your Local Supervising Authority Midwifery Officer.⁸
23. If you are a registered midwife who is also registered on the specialist community public health nurse (SCPHN) part of the register and whose only practice is in a SCPHN role then you do not need to file an ItP form. Your register entry will record that you are not entitled to practise as a midwife in the UK.
24. If you are a registered midwife and have not filed an ItP form during the current three year renewal period, and you now wish to return to midwifery practice, you must successfully complete an appropriate return to midwifery practice programme approved by the NMC before you can serve an ItP form and return to practice as a practising midwife.⁹

25. Registered nurses or midwives who are admitted to another part of the register since their registration was last renewed or they joined the register only need to meet the practice hours requirement for their initial registration. They will need to meet the practice hours requirements for registration in both parts in subsequent three year renewal periods.¹⁰

The purpose of these requirements

26. The practice hours requirements are designed to help nurses and midwives to maintain safe and effective practice, and keep their skills up to date.

How to meet the requirements

27. You can only count practice hours that you undertook while you were registered. You cannot count unregistered practice towards the practice hours requirement.

28. You must meet your practice hours in a role where you rely on your skills, knowledge and experience of being a registered nurse or midwife.

- This includes practice as a nurse, midwife and SCPHN, in roles that are likely to require registration;
- This also includes nurses and midwives who rely on their skills, knowledge and experience of being a registered nurse or midwife, but are in roles where their employment contract does not expressly require them to be registered with us. For example, this could include roles in public health or nursing or midwifery management, commissioning, policy and education;
- This may include work done in voluntary roles, where a nurse or midwife is relying on their skills, knowledge and experience of being a registered nurse or midwife;
- Hours undertaken in any healthcare, nursing or midwifery assistant or support worker roles cannot be counted towards practice hours as a registered nurse or midwife.

29. Practice hours should reflect your current scope of practice. Practice hours do not have to be related to your original field of practice when you first joined the register. Irrespective of your role, you must comply with *The Code: professional standards of practice and behaviour for nurses and midwives*. This includes the duty to recognise and work within the limits of your competence.

30. If you are a registered midwife who is also registered on the SCPHN part of the register and only practising in a SCPHN role, please refer to Guidance Sheet 2 on pages 42-43.



Further information on working outside the UK and returning to practice can be found on our website www.nmc.org.uk/registrations

How to meet the requirements continued

31. If you are working overseas (or have worked overseas for part of your three year renewal period) as a nurse or midwife you can meet the practice hours on the basis of your registration with the NMC. You should always register with the appropriate regulator in the country in which you are practising. Please refer to our guidance on working outside the UK.
32. If you have had a career break, you will still be able to meet the practice hours requirement if you have completed the required hours of practice as a registered nurse or midwife during your three year renewal period.
33. If you have not undertaken any type of work where you relied on your skills, knowledge or experience as a registered nurse or midwife, or if you are unable to meet the practice hours requirement, you have two options:
 - You can successfully complete an appropriate NMC approved return to practice programme before the date of your revalidation application. These programmes are designed to allow you to renew your registration and return to practice after a break in practice. Further information about return to practice programmes is available online, or
 - You can cancel your registration. You will continue to hold a nursing or midwifery qualification, but will not be a registered nurse or midwife. You can apply for readmission to the register in future if you wish to practise as a nurse or midwife. Information on cancelling registration and seeking readmission to the register is available online.
34. If you choose not to renew your registration and lapse from the register (which includes cancelling your registration), you cannot rely on any hours of work you undertook in a role after the date you ceased to be registered for the purpose of seeking readmission to the register. Unregistered practice does not count towards meeting the readmission requirements.

How to record practice hours

35. We strongly recommend that you maintain a record of practice hours you have completed. This will form part of the discussion you have with your confirmer, and you will also need to have this information available in case we request to see it for verification of your application. We have provided a template to help you record your practice hours. Your records should include:
 - dates of practice;
 - the number of hours you undertook;
 - name, address and postcode of the organisations;
 - scope of practice (see tip box on page 8);
 - work setting (see tip box on page 8);
 - a description of the work you undertook, and
 - evidence of those practice hours, such as timesheets, job specifications and role profiles.

36. You do not necessarily need to record individual practice hours. You can describe your practice hours in terms of standard working days or weeks.

What you need to tell us in your online application

37. When you apply for revalidation, you need to declare that you have met the practice hours requirement. You only need to tell us about the most recent hours you have undertaken to meet the minimum 450/900 hours requirement. If you are currently practising in more than one setting, please tell us first about the one that you consider to be your main setting.
38. You will also be asked to enter the following details:
- whether you are currently practising;
 - if you are currently in practice, where you undertake that practice, including details of your scope of practice and work setting, and
 - if you are not currently in practice, where you undertook your most recent practice, including details of your scope of practice and work setting.
39. If you have completed a return to practice course or been admitted to another part of the register your practice hours declaration will be as follows:
- If you have recently completed an approved return to practice course since you last renewed your registration or joined the register, you will be able to meet the practice hours requirement for that registration.
 - If you have been admitted to another part of the register since you last renewed your registration or joined the register (for example you are a nurse who has undertaken training as a midwife and gained a second registration as a midwife), you only need to meet the practice hours requirement for your initial registration.
 - For further information about what you will need to tell us for the practice hours part of your revalidation application in these circumstances please see our guidance sheet at www.nmc.org.uk/revalidation/revalidation-guidance-and-resources.
40. Please note that next time you apply for revalidation, if you wish to renew your registration on both parts of the register and continue practising as both a nurse and a midwife, you will need to meet the practice hours requirements for both parts.

CONTINUING PROFESSIONAL DEVELOPMENT

The requirements

41. You must have undertaken 35 hours of continuing professional development (CPD) relevant to your scope of practice as a nurse or midwife, in the three year period since your registration was last renewed or you joined the register.¹¹
42. Of those 35 hours of CPD, at least 20 must have included participatory learning.¹²
43. You must maintain accurate records of the CPD you have undertaken. These records must contain:
 - the CPD method;
 - a description of the topic and how it related to your practice;
 - the dates on which the activity was undertaken;
 - the number of hours (including the number of participatory hours);
 - the identification of the part of the Code most relevant to the activity, and
 - evidence that you undertook the CPD activity.¹³

The purpose of these requirements

44. As a professional, you have a duty to keep your professional knowledge and skills up to date through a continuous process of learning and reflection.
45. The CPD requirements are designed to help nurses and midwives to maintain safe and effective practice, to improve practice or develop new skills where a gap has been identified and to respond to changes and advances in nursing and midwifery.
46. The participatory requirement also helps to challenge professional isolation by requiring learning through engagement and communication with others.

How to meet the requirements

47. We do not prescribe any particular type of CPD. We think that you are better placed to decide what learning activity would be most suitable and beneficial to your individual scope of practice. Guidance Sheet 3 on pages 44–45 lists some individual and participatory CPD activities that you can undertake. It is not an exhaustive list and we have only provided it as an example.
48. Any learning activity you participate in should be relevant to your scope of practice as a nurse or a midwife. Therefore, you should not include mandatory training that is not directly related to your practice (for example, fire training or health and safety training) as part of your 35 hours of CPD. However, if you undertake any mandatory training that is necessary to your scope of practice and professional development (for example, mandatory training on equality legislation if you are in a policy role), you could include that.
49. Participatory learning includes any learning activity in which you personally interact with other people. It is an activity undertaken with one or more professionals or in a larger group setting. The group does not always need to be in a common physical environment, such as a study group or conference. It could be a group in a virtual environment (such as an online discussion group). The professionals that you engage with through participatory learning do not have to be healthcare professionals.

How to record CPD

50. You must maintain accurate records of your CPD activities. This will form part of the discussion you have with your confirmer, and you will also need to have this information available in case we request to see it for verification of your application. We have provided a template to help you record your CPD activities. Your records should include:
 - the CPD method;
 - a brief description of the topic and how it relates to your practice;
 - dates the CPD activity was undertaken;
 - the number of hours and participatory hours;
 - identification of the part of the Code most relevant to the CPD, and
 - evidence of the CPD activity (Guidance Sheet 3 on pages 44–45 provides examples of the kind of evidence you can record).

What you need to tell us in your online application

51. You need to declare that you have met the CPD requirement.

PRACTICE-RELATED

FEEDBACK

The requirement

52. You must have obtained five pieces of practice-related feedback in the three year period since your registration was last renewed or you joined the register.¹⁴

The purpose of this requirement

53. The practice-related feedback requirement is intended to encourage nurses and midwives to be more responsive to the needs of patients and service users and those who care for them. Nurses and midwives need to seek feedback from those they work with and care for and importantly they need to use the feedback that they receive to assess and make improvements to their practice.

How to meet the requirement

54. We recommend that you try to obtain feedback from a variety of sources, for example:

- feedback from patients, service users, carers or students as part of your day to day practice;
- feedback from colleagues such as nurses, midwives and healthcare professionals;
- feedback from colleagues in management, on reception, in assistant positions, as well as fellow teachers, researchers, academics or policy colleagues;
- complaints;
- team performance reports;
- serious event reviews, and
- feedback received through your annual appraisal.

55. Types of feedback:

- feedback can be about your individual practice or about your team, ward, unit or organisation's practice (you should be clear about the impact the feedback had on your practice);
- formal or informal;
- written or verbal, and
- positive or constructive.

56. It's likely that you will already receive a range of feedback. In many organisations, feedback is already collected in a variety of ways. You must seek consent to access or use your employer's information. Any information must be extracted in a way that no information identifying an individual is obtained, used or recorded. For example, you must not forward work emails to your personal accounts, or download and take copies of employer records. See Guidance Sheet 1 on pages 39-41 for more information.
57. Should you choose to solicit feedback directly from colleagues, patients or service users, you must make clear in your request that no information identifying individuals should be included in any feedback provided. You should also inform them how you intend to use their feedback.

How to record feedback

58. We recommend that you keep a note of the content of any feedback you obtain, including how you used it to improve your practice. This will be helpful for you to use when you are preparing your reflective accounts.
59. You may choose to collect more feedback but to meet the revalidation requirement you only need to note the details of five pieces of feedback.
60. In any note you keep, you must not record any information that might identify an individual, whether that individual is alive or deceased. Guidance Sheet 1 on pages 39-41 provides guidance on how to make sure that your notes do not contain any information that might identify an individual.

What you need to tell us in your online application

61. You need to declare that you have met the feedback requirement.



WRITTEN REFLECTIVE

ACCOUNTS

The requirement

62. You must have prepared five written reflective accounts in the three year period since your registration was last renewed or you joined the register. Each reflective account must be recorded on the approved form and must refer to:
- an instance of your CPD and/or
 - a piece of practice-related feedback you have received and/or
 - an event or experience in your own professional practice and how this relates to the Code.

The purpose of this requirement

63. We want to encourage nurses and midwives to engage in reflective practice so that they identify any changes or improvements they can make to their practice based on what they have learnt.
64. This requirement should also raise awareness of the Code and encourage nurses and midwives to consider the role of the Code in their practice and professional development.

How to meet the requirement

65. Each reflective account can be about an instance of CPD, feedback, an event or experience in your practice as a nurse or midwife, or a combination of these. For example, you could create a reflective account on a particular topic which may have arisen through some feedback your team received following an event, such as consent and confidentiality and identify how that relates to the Code.



How to record your reflective accounts

66. We have provided a form that you must use to record your reflective accounts. You must explain what you learnt from the CPD activity, feedback, event or experience, how you changed or improved your practice as a result, and how this is relevant to the Code.
67. This form can be hand written, typed or, if necessary, dictated.
68. Your reflective accounts must not include any information that might identify an individual whether that individual is alive or deceased. Guidance Sheet 1 on pages 39-41 provides guidance on how to make sure that your reflective accounts do not contain any information that might identify an individual.
69. You are not required to submit a copy of the reflective accounts to the NMC. However, you should retain these as a record to inform your reflective discussion and to show your confirmer.

What you need to tell us in your online application

70. You need to declare that you have met the requirement for written reflective accounts.

REFLECTIVE DISCUSSION

The requirement

71. You must have had a reflective discussion with another NMC registrant, covering your five written reflective accounts on your CPD and/or practice-related feedback and/or an event or experience in your practice and how this relates to the Code.¹⁶
72. You must ensure that the NMC registrant with whom you had your reflective discussion signs the approved form recording their name, NMC Pin and email, as well as the date you had the discussion.¹⁷

The purpose of this requirement

73. This requirement will encourage a culture of sharing, reflection and improvement. It does this in two ways: by requiring nurses and midwives to discuss their professional development and improvement, and by ensuring that nurses and midwives do not practise in professional isolation.

How to meet the requirement

74. You must discuss your written reflective accounts with an NMC-registered nurse or midwife as part of a reflective discussion. The nurse or midwife must have an effective registration with the NMC, by which we mean they cannot be subject to any kind of suspension, removal or striking-off order at the time of having the discussion.
75. They could be someone you frequently work with or someone from a professional network or learning group. You do not need to work with them on a daily basis and you do not need to undertake the same type of practice. You do not need to be on the same part of the register as them (so a nurse can have a reflective discussion with a midwife and vice versa). It is for you to decide the most appropriate person for you to have this conversation with, including whether they are senior or junior to you.
76. If your confirmer is a nurse or midwife, your reflective discussion can form part of the confirmation discussion. If your confirmer is not a nurse or midwife, you will need to have your reflective discussion with an NMC-registered nurse or midwife before your confirmation discussion with your confirmer.
77. If you practise in a setting with few or no nurses or midwives, you can reach out to NMC-registered peers from your wider professional or specialty network in order to have your reflective discussion.
78. If you are a midwife, you may use your annual review with your midwifery supervisor as an opportunity to have your reflective discussion.
79. We expect the discussion to be a face-to-face conversation in an appropriate environment. If for some reason you cannot have a face-to-face discussion, then you could arrange a video conference.

80. During your discussion you should not discuss patients, service users or colleagues in a way that could identify them unless they expressly agree. For further information on reflective discussions please see our guidance sheet at www.nmc.org.uk/revalidation/revalidation-guidance-and-resources.

How to record your reflective discussion

81. We have provided an NMC form that you must use to record your discussion. You must make sure that the nurse or midwife with whom you had your reflective discussion signs the form and records their name, NMC Pin, email, professional address including postcode, contact number and the date you had the discussion and a summary of the discussion¹⁸. You should keep the completed and signed form.
82. The discussion summary section of the form must not include any information that might identify an individual, whether that individual is alive or deceased. Guidance Sheet 1 on pages 39-41 provides guidance on how to make sure that your notes do not contain any information that might identify an individual.

What you need to tell us in your online application

83. You need to declare that you have had a reflective discussion with another NMC-registered nurse or midwife.
84. You will also need to enter the name, NMC Pin, email, professional address including postcode and contact number of the nurse or midwife with whom you had the discussion, as well as the date you had the reflective discussion.



HEALTH AND CHARACTER

The requirements

85. You must provide a health and character declaration.¹⁹
86. You must declare if you have been convicted of any criminal offence or issued with a formal caution.²⁰
87. You will be asked to declare if you have been subject to any adverse determination that your fitness to practise is impaired by a professional or regulatory body (including those responsible for regulating or licensing a health and social care profession).²¹

The purpose of these requirements

88. These requirements will help to satisfy the Registrar that the nurse or midwife is capable of safe and effective practice.

How to meet the requirements

89. You will need to complete these declarations as part of your revalidation application.
90. When making these declarations please refer to our health and character guidance for nurses and midwives at www.nmc.org.uk/cautions-convictions, where there is also information on declaring police charges, cautions and convictions.
91. Your character is important and is central to the Code because nurses and midwives must be honest and trustworthy. Your character is based on your conduct, behaviour and attitude. You must declare if you have been convicted of any criminal offence or issued with a formal caution.²² In accordance with the Code, we expect you to declare any cautions and convictions to the NMC immediately, not just at the point of revalidation.
92. You will also be asked to declare if you have been charged with a criminal offence or if you have been subject to any determination by a professional or regulatory body (including those responsible for regulating or licensing a health or social care profession) to the effect your fitness to practise is impaired.²³
93. A caution or conviction includes a caution or conviction you have received in the UK for a criminal offence, as well as a conviction received elsewhere for an offence which, if committed in England and Wales, would constitute a criminal offence.²⁴ Please do not notify the NMC of motoring offences where you received a fixed penalty (unless it led to a disqualification of driving) or offences that have previously been considered by the NMC. See our website for further information on protected cautions and convictions.
94. We expect you to be in a state of health that ensures you are capable of safe and effective practice without supervision, after any reasonable adjustments are made by your employer.
95. This does not mean there must be a total absence of any disability or health condition. Many people with disabilities or health conditions are able to practise effectively with or without adjustments to support their practice.

How to record health and character declarations

96. If your health and character are sufficiently good to enable you to practise safely and effectively in accordance with the Code, and you do not have any charges, cautions, convictions or determinations to declare, you do not need to keep any information as part of this requirement. Your confirmer does not need to check that you have met this requirement.
97. If you do need to declare any charges, cautions, convictions or determinations you will need to keep evidence of these to provide us with further information. You do not need to inform your confirmer of any declaration because we will be assessing these declarations ourselves.



Paragraph 23.2 of the Code states that you must inform us and any employers you work for at the first reasonable opportunity of any caution or charge against you, or if you have received a conditional discharge in relation to, or have been found guilty of, a criminal offence (other than a protected caution or conviction).

What you need to tell us in your online application

98. You need to declare that your health and character are sufficiently good to enable you to practise safely and effectively in accordance with the Code.
99. You will be asked to declare if you have received a police charge, caution or conviction, other than a protected caution or conviction, or an adverse determination by a professional or regulatory body.



PROFESSIONAL INDEMNITY

ARRANGEMENT

The requirement

100. You must declare that you have, or will have when practising, appropriate cover under an indemnity arrangement.²⁵

The purpose of this requirement

101. By law, you must have in place an appropriate indemnity arrangement in order to practise and provide care. While the arrangement does not need to be individually held by you, it is your responsibility to ensure that appropriate cover is in force.

How to meet the requirement

102. You will need to complete this declaration as part of your revalidation application.
103. Most employers provide appropriate indemnity cover for their employees, so please check with your employer.
104. Please refer to our information on professional indemnity arrangements for nurses and midwives when making this declaration (www.nmc.org.uk/indemnity). This document defines 'appropriate cover' and sets out information for those who are employed, self-employed or undertake work in both employed and self-employed roles. It also sets out information for those who work in education, undertake voluntary work, or are having a break in their practice.
105. If it is discovered that you are practising as a nurse or midwife without an appropriate indemnity arrangement in place, you will be removed from the NMC register and unable to practise as a nurse or midwife.

How to record your professional indemnity arrangement

106. Your declaration will be made as part of your revalidation application.
107. We strongly recommend that you retain evidence that you have an appropriate arrangement in place.
108. If your arrangement is provided through membership of a professional body or a private insurance arrangement, your declaration should be based on having in place an indemnity arrangement which provides 'appropriate cover' in relation to your individual scope of practice, as explained in information on professional indemnity arrangements for nurses and midwives. Please note that you will need to justify decisions on cover you put in place or rely on, if we request you to do so.
109. Your confirmer does not need to check that you have met this requirement.

What you need to tell us in your online application

110. You need to inform the NMC whether your indemnity arrangement is through your employer, membership of a professional body, or a private insurance arrangement. Alternatively, you will be able to inform us that you are not practising at this time but that you intend to have appropriate cover in place before you practise.
111. You are required to have appropriate cover in place for all of your current practice settings. If you are currently practising in more than one setting, please tell us first about your arrangement in relation to your main practice setting. Please then add other arrangements to cover all your current practice settings.
112. If your indemnity arrangement is provided through membership of a professional body or a private insurance arrangement, you will be asked to provide the name of the professional body or provider.²⁶



CONFIRMATION

The process

113. We will ask you for information for the purpose of verifying the declarations you have made in your application.²⁷
114. This will be a declaration that you have demonstrated to an appropriate confirmer that you have complied with the revalidation requirements. We have provided a form for you to use to obtain this confirmation.
115. We will ask you to provide the name, NMC Pin or other professional identification number (where relevant), email, professional address and postcode of the confirmer.

The purpose of confirmation

116. Confirmation encompasses several benefits for nurses and midwives. It will provide assurance, increase support and engagement between nurses and midwives and their confirmers, and make nurses and midwives more accountable for their own practice and improvement. It should support nurses and midwives by increasing their access to appraisals.
117. The interactive nature of the confirmation process should reduce professional isolation and encourage a culture of sharing, reflection and improvement.
118. Ultimately, the confirmation process is designed to increase professionalism by making nurses and midwives more accountable for their practice and improvement. This requirement also gives us an additional layer of assurance that nurses and midwives are complying with the revalidation requirements.
119. Confirmation is not about judging whether a nurse or midwife is fit to practise.

How to obtain confirmation

120. The confirmation process involves having a discussion about your revalidation with an appropriate confirmer. We recommend that you obtain confirmation through a face-to-face discussion or video conference.
121. As part of that discussion, you will demonstrate to that confirmer that you have complied with all of the revalidation requirements, except professional indemnity arrangement and health and character, as set out in this guidance.
122. We recommend that you obtain your confirmation during the final 12 months of the three year renewal period to ensure that it is recent. If your confirmation was obtained earlier, we may ask you to explain why.
123. If your confirmer is a nurse or midwife, your reflective discussion can form part of the confirmation discussion. If your confirmer is not a nurse or midwife, you will need to have your reflective discussion with an NMC-registered nurse or midwife before your confirmation discussion with your confirmer.
124. We have provided further information about the role of confirmers in guidance which you should ensure your confirmer has read.

An appropriate confirmer

125. Your line manager is an appropriate confirmer, and we strongly recommend that you obtain confirmation from your line manager wherever possible. A line manager does not have to be an NMC-registered nurse or midwife.
126. If you do not have a line manager, you will need to decide who is best placed to provide your confirmation. Wherever possible we recommend that your confirmer is an NMC-registered nurse or midwife. It is helpful if they have worked with you or have a similar scope of practice, but this is not essential.
127. If that is not possible, you can seek confirmation from another healthcare professional that you work with and who is regulated in the UK. For example, you could ask a doctor, dentist or a pharmacist. You will need to record their professional Pin or registration number and the name of their professional regulator.
128. If you do not have a line manager, or access to an NMC-registered nurse or midwife or another healthcare professional, please check our online confirmation tool for further guidance as to who can act as a confirmer in this situation at www.nmc.org.uk/confirmation.
129. If your confirmer is an NMC-registered nurse or midwife, they must have an effective registration with the NMC. We may not be able to verify your application if your confirmation was provided by a person who was subject to any kind of suspension, removal or striking-off order at the time of making the confirmation.

Obtaining confirmation if you work wholly overseas

130. If you work wholly overseas, you can seek confirmation from your line manager where you undertake your work.
131. If you do not have a line manager, you will need to decide who is best placed to provide your confirmation. Wherever possible we recommend that your confirmer is a nurse or midwife regulated where you practise, or another regulated healthcare professional. Our online confirmation tool provides further guidance as to who can act as a confirmer in this situation.

Obtaining confirmation if you have more than one line manager

132. If you have more than one employer or undertake more than one role, you only need to obtain one confirmation. You will need to decide which line manager is most appropriate to provide confirmation that you have met the revalidation requirements.
133. We recommend that you have your revalidation discussion and obtain confirmation through the line manager where you undertake the majority of your work. You may choose to have a revalidation discussion with each of your line managers, and bring the outputs of those discussions to the line manager you think is most appropriate to be your confirmer.

Confirmation and appraisals

134. The revalidation process is designed so that it can form part of an appraisal process, and where possible we recommend that you use your annual appraisal to have your revalidation discussion and obtain confirmation.
135. If your line manager is an NMC-registered nurse or midwife, you might like to have your reflective discussion at the same time as your confirmation discussion as part of your annual appraisal.
136. However, it is not a requirement of revalidation that you obtain your confirmation as part of an appraisal.

How to record confirmation

137. We have provided an NMC form you must use to record your confirmation. Your confirmer will need to complete and sign this form.
138. You should keep the completed and signed form.

What you need to tell us in your online application

139. You will be asked to enter the name, NMC Pin or other professional identification number (where relevant), email, professional address including postcode and contact number of your confirmer.
140. We will also ask you whether you have a regular appraisal and whether you have a line manager who is an NMC-registered nurse or midwife so that we understand what level of support was available to you in completing your revalidation application.

THE APPLICATION

PROCESS

Before you apply

- **Set up an NMC Online account.**

You will need to submit your application through NMC Online. You can also check your renewal date on NMC Online. We have published a step-by-step guide to registering for NMC Online at www.nmc.org.uk/registration/nmc-online.



Once you have set up your online account, you will receive all subsequent notifications by email. Please add the NMC as a safe sender and check your email regularly during the revalidation process.

- **Keep your contact details up to date so that we can notify you when your revalidation application is due.**

The most common reason for lapsed registration (and illegal practice) is a failure to keep the NMC updated on your contact details.

- **Make sure you know when your revalidation application is due.**

You must submit your application by the date we specify. You may affect our ability to process your revalidation application if you do not submit your application by this date, and the renewal of your registration may be at risk as a result.

- **Make sure that you have all your supporting evidence to hand when you start your online application.**

Do not forget that if you are a registered midwife practising in the UK, you will need to file your Intention to Practise notification form. This should be submitted annually to your named supervisor of midwives.²⁸

- Please contact the NMC well in advance of your revalidation application date if you require a reasonable adjustment for using NMC Online.

The online application

141. Your online application opens 60 days before your revalidation application date.

142. During this 60 day period you will need to log into your application via NMC Online and address each of the requirements.

Contacting your employer or any other relevant third party

143. As part of your application process we may need to contact your employer or any other relevant third party who can verify the information that you have provided in your application²⁹.

144. In your online application you will be asked to provide consent for this purpose.

Equality and diversity information

145. As part of the online application process you will be asked to supply some equality and diversity information. We will use this information to monitor our services and make sure we are treating everyone in a fair and equal way. The questions have been designed to gather data about our service users in relation to the characteristics protected by the law under the Equality Act 2010.
146. We will keep the information from this questionnaire confidential and store it in line with the Data Protection Act 1998 and the NMC's Data Protection Policy. By submitting this sensitive personal information to us, you explicitly consent to the collection and processing of your sensitive personal information in accordance with the NMC's Data Protection Policy.



Details of our Data Protection Policy are included in our privacy notice at:
www.nmc.org.uk/privacy

147. Providing this information is optional and will not affect your revalidation application or registration renewal. If you would prefer not to disclose this information you can select the 'prefer not to say' option for any/all of the questions.

Paying your fee

148. You will also need to pay your annual fee as part of your revalidation application. Your registration will not be renewed until we have received your payment.
149. Please refer to our guidance on paying your fees which sets out the different ways that you can pay, including direct debit, online or by telephone. This guidance is available on our website at www.nmc.org.uk/registration/staying-on-the-register/paying-your-fee.
150. As a registered UK tax payer you can also claim tax relief on the NMC registration fees. HM Revenue and Customs (HMRC) allows individuals to claim tax relief on professional subscriptions or fees which have to be paid in order to carry out a job. Registration fees paid to us are included in this category. Please refer to our guidance on how to claim tax relief on your fee.
151. Please note that you must still pay your annual fee every year to retain your registration with the NMC.

After you have completed your application

152. After you have completed your online application you will be offered the option of printing a paper copy of your application for your records.
153. Once your application has been successfully processed and your payment has been received we will send you an email confirming that your registration has been renewed.
154. We advise you to search the register on our website: www.nmc.org.uk/search-the-register to double check your status.

Reasonable adjustments for using NMC Online

155. We will make reasonable adjustments for nurses and midwives who have a disability which means that they may find using NMC Online difficult. If you require a reasonable adjustment to be made, you must contact the NMC well in advance of your application date so that we can consider your request and make any necessary adjustments.

Arrangements for exceptional circumstances

156. We have special arrangements in place for nurses and midwives who cannot meet the revalidation requirements as a result of exceptional circumstances.

By exceptional circumstances we mean that you:

- have not been in practice for sufficient time between October 2015 when the revalidation guidance was published and your revalidation application date (for example, if you have been on maternity leave or sick leave) to meet the additional requirements, or
- you cannot meet one or more of the requirements at any time because a protected characteristic under the Equality Act may apply.

157. If you are able to establish that exceptional circumstances apply in your case, you will still need to meet the Prep requirements for renewal. Please see our guidance sheet on exceptional circumstances for further information at www.nmc.org.uk/standards/revalidation/revalidation-guidance-and-resources.

Requesting an extension to submit your application

158. We will not usually consider any requests for extensions to submit a revalidation application. You should have met the requirements during the three years prior to the renewal of your registration.

159. However, if you believe that you have a good reason why you cannot submit your revalidation application by the specified date, you must contact the NMC as far in advance of your revalidation application date as possible to discuss your situation.

160. You should contact us by email (see page 4), and note in the subject line that your email is regarding a request to extend your revalidation application.

161. We are only able to grant an extension prior to the date your registration is due to lapse.³¹ Extensions will be granted for a period of up to six weeks.³⁰

162. In granting an extension, we will take into account:

- whether you have contacted the NMC in advance of the date your revalidation application is due;
- the reason why you cannot submit your revalidation application by the specified date;
- whether you are capable of completing the outstanding revalidation requirements and submitting your application within the additional period of time;
- whether there are any concerns about your fitness to practise, and
- whether the annual fee has been or will be paid by the required date.

163. Any extension we agree in relation to your revalidation application would not include an extension to the date on which your annual fee is due to be paid.

VERIFICATION OF YOUR APPLICATION

164. Each year we will select a sample of nurses and midwives to provide further information or evidence to verify their application.³² Such a request does not necessarily mean that there are any concerns about your application and you can continue to practise while we review the information that you provide.
165. Where possible we will notify you immediately after you have submitted your application and made your payment if you have been selected to provide further information. If this is not possible we will contact you by email within 24 hours of you submitting your revalidation application and making your payment. Please check your email during this time.
166. If you are selected to provide further information, you will need to complete an online form where you will be asked to provide further information. We may also request further evidence. We will ask you to provide this information within a reasonable time. Please note that although your registration will not lapse during the verification process, your registration will not be renewed until the verification process is complete.
167. The table overleaf sets out the information that you will need to provide if you are selected to provide further information. You should already have this information so you should not need to seek any additional information.
168. We will contact your confirmer to request further information. Please ensure that your confirmer is aware that if they do not respond to our request for verification they may put your revalidation application at risk. We may also contact your employer and reflective discussion partner.
169. If we identify that you have not complied with the revalidation requirements, or you submit fraudulent information, your registration might be at risk.
170. The verification process will be completed within three months of your renewal date.



Verification information

Practice hours

You will need to provide the following information, starting with your most recent practice until you demonstrate the minimum number of practice hours required:

- dates of practice;
- the number of hours you undertook;
- name, address and postcode of the organisations;
- scope of practice and work setting (see tip box on page 8);
- a description of the work you undertook, and
- if practising overseas, whether you are registered with the appropriate regulating body.

We may contact your employer for further information, and you may also be asked to provide further evidence of practice hours.

If you are using a completed return to practice course for your practice hours requirement, or you have been admitted to another part of the register since you last renewed your registration or joined the register, please see our guidance sheet at www.nmc.org.uk/revalidation/revalidation-guidance-and-resources for further information.

Continuing professional development

You will need to provide the following information:

- the CPD method (see pages 44–45 for further information);
- a brief description of the topic and how it relates to your practice;
- the dates the CPD activity was undertaken;
- the number of hours and participatory hours, and
- identification of the part of the Code most relevant to the CPD.

You may also be asked to provide evidence of the CPD activity.

Reflective discussion

You will not need to upload a copy of the signed reflective discussion form. We may contact your reflective discussion partner regarding your discussion.

Professional indemnity arrangement

You are required to have appropriate cover in place for all of your current practice settings. If your arrangement is provided through membership of a professional body or a private insurance arrangement you will be asked to confirm a) that you have read and understood our information on professional indemnity arrangements for nurses and midwives; b) that you have in place an indemnity arrangement which provides “appropriate cover”, in relation to your individual scope of practice, as explained in information on professional indemnity arrangements for nurses and midwives; and c) that you understand that you will need to justify decisions on cover you put in place or rely on, if we request you to do so. If you are currently practising in more than one setting, please tell us first about your arrangement in relation to your main practice setting, followed by any other arrangements to cover all your current practice settings.

Confirmation

You will not need to upload a copy of the signed confirmation form. We will contact your confirmer using the contact details you provided us in your initial application. Please ensure that your confirmer is aware that if they do not respond to our request for verification they may put your revalidation application at risk.

REVALIDATION AND NMC FITNESS

TO PRACTISE PROCESSES



171. If an employer, a nurse or midwife, or any other individual becomes aware of a serious concern about the fitness to practise of another nurse or midwife they should raise it promptly through our fitness to practise procedures. All nurses and midwives have a professional duty to raise a concern about the practice of another nurse or midwife either through their employer or directly with us. They should not wait until a nurse or midwife's renewal is due to raise such a fitness to practise concern.
172. Revalidation does not create a new way of raising such a fitness to practise concern about a nurse or a midwife, and the confirmation stage of revalidation does not involve making a judgment as to whether a nurse or midwife is fit to practise.
173. If you are subject to an NMC investigation, condition(s) of practice order or a caution, you will be able to apply to renew your registration as long as you fulfil all the requirements for renewal. However, you will remain subject to NMC fitness to practise processes and the outcome of those processes.
174. If you have been struck off the register, you are not able to revalidate because you are no longer on the register. You will need to apply for restoration to the register.



For more information

www.nmc.org.uk/concerns-nurses-midwives/information-under-investigation/restoration/

175. If you are suspended from the register, you are not able to revalidate during your suspension. Following cessation of your suspension, if your registration is effective you will need to comply with the revalidation requirements at the time that your registration is due to be renewed. If your registration is not effective following the cessation of your suspension, you will need to follow the readmission process.

CANCELLING YOUR

REGISTRATION

176. You may not want to retain one or all your registrations with us.

- For example you may wish to cancel all of your registrations with us if you have moved abroad, have retired from practice or changed career,
- Alternatively you may wish to cancel one of your registrations if you wish to continue practising in one but not the other. For example if you are registered as both a nurse and a midwife but only wish to continue practising as a midwife you may want to cancel your nursing registration.



Please note that if you are receiving pay as a nurse or midwife whilst on maternity, sick or annual leave you may need to maintain your registration with us throughout this period.

177. If you wish to cancel at the time of your revalidation application, you can do this online through the online revalidation application.

178. If you want to cancel your registration when you are not due for revalidation, you must submit an 'application to lapse your registration' form.

179. You will need to provide your NMC Pin, full name, contact address, the reason for cancelling and a declaration stating that you are not aware of any matter which could give rise or has given rise to a fitness to practise allegation being made against you.



For more information

Information on cancelling your NMC registration is available on our website at www.nmc.org.uk/registration/leaving-the-register/cancelling-registration/

180. You will not be able to practise or present yourself as a registered nurse or midwife in the UK if you cancel your registration with the NMC. It is a criminal offence to falsely represent yourself as being on the register, or on part of it, or to use a title to which you are not entitled.³³

181. If you choose to cancel your registration, and later wish to resume practising as a nurse or midwife in the UK, please refer to our guidance on readmission to the register at www.nmc.org.uk/registration/returning-to-the-register. If you apply for readmission within six months of having lapsed from the register after failing to revalidate, you will have to meet the revalidation requirements in addition to the usual readmission requirements, unless you are able to demonstrate that exceptional circumstances apply.

Failure to revalidate and appeals

182. If you fail to submit your revalidation application before the end of your three year renewal period, your registration will lapse (automatically expire). If you want to come back on to the register, you will need to apply for readmission.
183. If you submit an application for revalidation, but you fail to meet the revalidation requirements and your application to renew your registration is refused as a result, you may appeal this decision within 28 days of the date on your decision letter.³⁴
184. A notice of appeal should be made in writing and include:
- your name, address and NMC Pin;
 - the date, nature and other relevant details of the decision against which the appeal is brought;
 - a concise statement of the grounds of the appeal;
 - the name and address of your representative (if any) and a statement as to whether the NMC should correspond with that representative concerning the appeal instead of you;
 - a statement that the notice is a notice of appeal;
 - a signature by or on behalf of you, and
 - a copy of any documents that you propose to rely on for the purposes of your appeal.³⁵

A notice of appeal should be sent to ragssupport@nmc-uk.org.

185. However, if you failed to pay the registration fee or to submit an application form at all within the required timescale and your application to renew your registration is refused as a result, you do not have a right of appeal.³⁶
186. If you do not renew your registration and lapse from the register, you are no longer a registered nurse or midwife. It is an offence to falsely represent yourself as being on the register, or on part of it, or to use a title to which you are not entitled.³⁷ If you lapse from the register you need to be careful not to mislead people into thinking you are on the register.



GUIDANCE SHEET 1:

NON-IDENTIFIABLE INFORMATION

You are likely to process personal data as part of your day to day role. If you are employed, you are likely to be covered by your employer's registration under data protection legislation. If you are practising as an independent or self-employed nurse or midwife you are already likely to be registered under data protection legislation in your capacity.

This guidance sets out your obligations in relation to confidentiality and data protection in relation to meeting the revalidation requirements. It does not cover your existing obligations in relation to data protection legislation.



Personal data means data which identifies an individual. Section 1(1) of the Data Protection Act 1998.

Your obligations in relation to confidentiality under the Code

The Code sets out the professional standards that you must uphold in order to be registered to practise in the UK. Paragraph 5 of the Code states:

Respect people's right to privacy and confidentiality

As a nurse or midwife, you owe a duty of confidentiality to all those who are receiving care. This includes making sure that they are informed about their care and that information about them is shared appropriately.

To achieve this, you must:

- respect a person's right to privacy in all aspects of their care (5.1)
- make sure that people are informed about how and why information is used and shared by those who will be providing care (5.2)
- respect that a person's right to privacy and confidentiality continues after they have died (5.3)
- share necessary information with other healthcare professionals and agencies only when the interests of patient safety and public protection override the need for confidentiality, and (5.4)
- share with people, their families and their carers, as far as the law allows, the information they want or need to know about their health, care and ongoing treatment sensitively and in a way they can understand. (5.5)

Making sure that your evidence does not include any personal information

In meeting the revalidation requirements and keeping your evidence, you must not record any information that might identify an individual, whether that individual is alive or deceased. This means that all information recorded must be recorded in a way that no patient, service user, colleague or other individual can be identified from the information.

For example, any notes or reflections must not include:

- the name of any individual;
- the date of any incident or event referred to;
- the particular ward or place where the event occurred, or
- descriptions of unique circumstances where an individual could be identified from the circumstances.

Any information extracted from employer data (such as complaints logs) must be extracted in a way that no information identifying an individual is obtained, used or recorded. For example, you must not forward work emails to your personal account, or download and take copies of employer records.

Example scenarios

You will already be aware of the importance of keeping personal information confidential, and not processing personal information outside of your employment or work settings. However, we have provided some simple examples below to demonstrate how an instance of feedback could be recorded in a way that no individual can be identified.

Scenario 1

In January 2015 Mrs Jones was in ward 8 with a broken hip. She made a complaint about lack of hydration. You want to use this feedback in one of your reflections as an example of where you put in place a new process to make sure all patients were offered water on a regular basis.

In your reflective account you could say: *'A patient with a serious injury made a complaint about lack of hydration.'*

No dates, names or wards have been included in the record, and the type of injury has also been omitted, so Mrs Jones cannot be identified from this information. You can then explain what you did, what improvement you made and how this is related to the Code.

Scenario 2

In reviewing the complaints log held by the maternity unit where you work, you noticed a complaint made by Mrs Smith in relation to a lack of continuity of care and handover between midwives at the end of a shift on 12 January 2015. You were one of the midwives involved, along with your colleague Sarah. You discussed this with your colleagues and have made improvements in the way you handover at the end of shifts. You want to use this feedback in one of your reflections.

Before writing your reflective account, you need to check with your employer that you can use information from the complaints log. In your reflective account you could say: *'A complaint was received from a mother about the lack of continuity of care and handover between myself and a colleague at the end of a shift.'*

No information identifying any individual, including both the mother and your colleague, has been included in this record. You can then explain what you did, what improvement you made and how this is related to the Code.

Storing your reflective accounts form, reflective discussion form and confirmation form

You are not required to submit these forms to the NMC at any point in the revalidation application. There is no requirement to store them electronically or upload them into NMC Online as part of your application, or if you are selected to provide further information to verify your evidence.

Your reflective discussion form and confirmation form contain personal data about another person. This means that there are data protection implications for nurses and midwives completing these forms. However, the Information Commissioner's Office (ICO) recognises that it would be highly disproportionate to expect nurses and midwives to have to register with them as data controllers. The ICO has confirmed that it is not planning to take any action against any nurse or midwife for failing to register. You may choose to store your completed reflective discussion and confirmation forms in either paper or electronic format. You should still respect the fact that these forms contain personal data about your reflective discussion partner and confirmer.

Further information

The Information Commissioner's Office has published a guide to data protection at ico.org.uk/for-organisations/guide-to-data-protection/

They have also published guidance specifically on anonymisation at ico.org.uk/for-organisations/guide-to-data-protection/anonymisation/

GUIDANCE SHEET 2: PRACTICE

HOURS REQUIREMENTS

FOR REGISTERED MIDWIVES WHO ARE ALSO REGISTERED AS SPECIALIST COMMUNITY PUBLIC HEALTH NURSES

Every person registered with the NMC is a nurse or a midwife or both. Some registered nurses and midwives have also completed a post-registration qualification which has resulted in an additional entry in the part of the register for Specialist Community Public Health Nursing (SCPHN).

SCPHN programmes can only be undertaken by individuals who are already registered on the nurses or midwives part of the NMC register. SCPHNs must maintain their registration as a nurse or a midwife and cannot renew their registration only as a SCPHN.

In this document, where we say 'midwife/SCPHN', we mean a registered midwife who is also on the register as a SCPHN.

Practice hours requirement for registered midwives who are SCPHNs

Midwife/SCPHNs will have to complete 450 practice hours every three years in order to remain registered with the NMC. Midwives who work wholly in a SCPHN role can use their practice in their SCPHN role to meet the practice hours requirement.

Submitting an Intention to Practise form

Midwife/SCPHNs who undertake any work as a practising midwife need to submit a completed Intention to Practise (ItP) form every year to their named supervisor of midwives and are subject to statutory supervision in accordance with rule 3 of the Midwives rules and standards 2012 (see Example A overleaf).

Midwife/SCPHNs who work wholly in a SCPHN role and do not undertake any work as a practising midwife do not need to serve an ItP and do not need to be supervised by a supervisor of midwives. They can maintain their midwifery registration but they are not entitled to provide midwifery care in the UK to women and babies or work as a practising midwife. Their entry on the register shows this (see Example B overleaf).

If a registered midwife has not served an ItP since the last time they renewed their registration or joined the register, they will need to complete a return to midwifery practice programme before being entitled to serve a new ItP and become a practising midwife again (see Example C overleaf).

- Example A:** A registered midwife practises as a midwife, but also works some of their time as a SCPHN. They will need to undertake 450 practice hours from across their midwifery and SCPHN scope of practice. They will need to submit a completed ItP form every year to their named supervisor of midwives and be subject to statutory supervision.
- Example B:** A registered midwife practises wholly as a SCPHN and does not undertake any practice as a midwife. They need to undertake 450 hours of practice in their SCPHN role. They don't have to submit an ItP form and are not supervised by a supervisor of midwives. They retain their midwifery registration, but the register makes clear that they are not able to provide midwifery care in the UK.
- Example C:** A registered midwife has been working wholly as a SCPHN and so has not served an ItP since the last time they renewed their registration or joined the register. They now wish to return to midwifery practice. Before they can return to midwifery practice, they will need to complete a midwifery return to practice programme. They can then submit an ItP and begin to practise as a midwife.

Midwife/SCPHNs who are also registered nurses

Nurses and midwives who are registered on both the midwifery and nursing parts of the register have to complete 900 practice hours every three years in order to remain on both parts of the register. Of these hours, 450 must be as a nurse, and 450 as a midwife.

This means that if a midwife/SCPHN is also a registered nurse, they will need to meet 900 practice hours. They will also need to submit a completed ItP form every year to their named supervisor of midwives and are subject to statutory supervision, unless they do not undertake any midwifery practice.

If such a nurse or midwife is working wholly in a SCPHN role and does not wish to undertake any work as a practising midwife, they can choose to only retain their registration as a nurse and SCPHN and lapse their midwifery registration. If they want to return to midwifery practice in the future they can complete a midwifery return to practice programme and seek readmission to the midwifery part of the register.

Midwives who work in community or other public health roles (such as Family Nurse Partnerships, neonatal or sexual health) but are not on the register as a SCPHN

These midwives must undertake 450 practice hours in each three year renewal period and submit their ItP to their supervisor of midwives annually and be supervised by a statutory supervisor of midwives. These requirements will apply to any registered midwives who are not also registered on the SCPHN part of the register.

GUIDANCE SHEET 3: EXAMPLES OF CPD ACTIVITIES

The table below sets out some examples of CPD activities you can undertake and examples of the types of evidence you could keep (for example in your portfolio). It is not an exhaustive list. It also indicates whether an activity is individual or participatory

You will need to decide whether an activity is participatory or not. Many activities can be participatory if you personally interacted with other people.

CPD activity	Suggested evidence to retain	Individual/Participatory
Structured learning (direct or distance learning style)	Certificate of completion, notes, learning outcomes	Individual/Participatory
Accredited higher education or training	Certificate of completion, notes, learning outcomes	Individual/Participatory
Mandatory training specifically relevant to role/scope of practice	Certification of completion, learning outcomes	Individual
Learning events such as workshops, conferences	Certificate of attendance	Participatory
Reading and reviewing publications	Copies of publications read, review notes including practice-related outcomes	Individual
Enquiry based research	Copies of publications or data reviewed, notes including practice-related outcomes	Individual
Peer review activities	Evidence of peer review including notes, observations and outcomes	Participatory
Coaching and mentoring (role in either delivery or being a recipient)	Evidence of coaching/mentoring undertaken including letters, notes, observations and practice-related outcomes	Participatory

CPD activity	Suggested evidence to retain	Individual/Participatory
Structured professional clinical supervision	Evidence of supervision including signed letters, notes, observations and practice-related outcomes	Participatory
Undertaking short supervised practice for specific skills development	Evidence of participation including signed letters, notes, observations and outcomes	Individual/Participatory
Group or practice meetings	Evidence of participation and role including signed letters, notes, observations and outcomes	Participatory
Participation in clinical audits	Evidence of participation and role including signed letters, notes, observations and outcomes	Participatory
Practice visits to different environments relevant to scope of practice	Evidence of participation including signed letters, notes, observations and outcomes	Individual/Participatory
Training related to job rotation or secondment, shadowing	Evidence of participation including signed letters, notes, observations and outcomes	Individual/Participatory



REFLECTIVE ACCOUNTS FORM

You **must** use this form to record five written reflective accounts on your CPD and/or practice-related feedback and/or an event or experience in your practice and how this relates to the Code. Please fill in a page for each of your reflective accounts, making sure you do not include any information that might identify a specific patient, service user or colleague. Please refer to our guidance on preserving anonymity in Guidance sheet 1 in *How to revalidate with the NMC*.

Reflective account:

What was the nature of the CPD activity and/or practice-related feedback and/or event or experience in your practice?

What did you learn from the CPD activity and/or feedback and/or event or experience in your practice?

How did you change or improve your practice as a result?

How is this relevant to the Code?

Select one or more themes: Prioritise people – Practise effectively – Preserve safety – Promote professionalism and trust

REFLECTIVE DISCUSSION FORM

You **must** use this form to record your reflective discussion with another NMC-registered nurse or midwife about your five written reflective accounts. During your discussion you should not discuss patients, service users or colleagues in a way that could identify them unless they expressly agree, and in the discussion summary section below make sure you do not include any information that might identify a specific patient or service user. Please refer to Guidance sheet 1 in *How to revalidate with the NMC* for further information.

To be completed by the nurse or midwife:

Name:	
NMC Pin:	

To be completed by the nurse or midwife with whom you had the discussion:

Name:	
NMC Pin:	
Email address:	
Professional address including postcode:	
Contact number:	
Date of discussion:	
Short summary of discussion:	
<p>I have discussed five written reflective accounts with the named nurse or midwife as part of a reflective discussion.</p> <p>I agree to be contacted by the NMC to provide further information if necessary for verification purposes.</p>	Signature:
	Date:

CONFIRMATION FORM

You **must** use this form to record your confirmation.

To be completed by the nurse or midwife:

Name:	
NMC Pin:	
Date of last renewal of registration or joined the register:	

I have received confirmation from (select applicable):

- A line manager who is also an NMC-registered nurse or midwife
- A line manager who is not an NMC-registered nurse or midwife
- Another NMC-registered nurse or midwife
- A regulated healthcare professional
- An overseas regulated healthcare professional
- Other professional in accordance with the NMC's online confirmation tool

To be completed by the confirmer:

Name:	
Job title:	
Email address:	
Professional address including postcode:	
Contact number:	
Date of confirmation discussion:	

If you are an NMC-registered nurse or midwife please provide:

NMC Pin:

If you are a regulated healthcare professional please provide:

Profession:

Registration number for regulatory body:

If you are an overseas regulated healthcare professional please provide:

Country:

Profession:

Registration number for regulatory body:

If you are another professional please provide:

Profession:

Registration number for regulatory body (if relevant):

Confirmation checklist of revalidation requirements

Practice hours

You have seen written evidence that satisfies you that the nurse or midwife has practised the minimum number of hours required for their registration.

Continuing professional development

You have seen written evidence that satisfies you that the nurse or midwife has undertaken 35 hours of CPD relevant to their practice as a nurse or midwife

You have seen evidence that at least 20 of the 35 hours include participatory learning relevant to their practice as a nurse or midwife.

You have seen accurate records of the CPD undertaken.

Practice-related feedback

- You are satisfied that the nurse or midwife has obtained five pieces of practice-related feedback.

Written reflective accounts

- You have seen five written reflective accounts on the nurse or midwife's CPD and/or practice-related feedback and/or an event or experience in their practice and how this relates to the Code, recorded on the NMC form.

Reflective discussion

- You have seen a completed and signed form showing that the nurse or midwife has discussed their reflective accounts with another NMC-registered nurse or midwife (or you are an NMC-registered nurse or midwife who has discussed these with the nurse or midwife yourself).

I confirm that I have read *Information for confirmers*, and that the above named NMC-registered nurse or midwife has demonstrated to me that they have complied with all of the NMC revalidation requirements listed above over the three years since their registration was last renewed or they joined the register as set out in *Information for confirmers*.

I agree to be contacted by the NMC to provide further information if necessary for verification purposes. I am aware that if I do not respond to a request for verification information I may put the nurse or midwife's revalidation application at risk.

Signature:

Date:

PRACTICE HOURS LOG TEMPLATE

Guide to completing practice hours log

To record your hours of practice as a registered nurse and/or midwife, please fill in a page for each of your periods of practice. Please enter your most recent practice first and then any other practice until you reach 450 hours. You do not necessarily need to record individual practice hours. You can describe your practice hours in terms of standard working days or weeks. For example if you work full time, please just make one entry of hours. If you have worked in a range of settings please set these out individually. You may need to print additional pages to add more periods of practice. If you are both a nurse and midwife you will need to provide information to cover 450 hours of practice for each of these registrations.

Work setting

- Ambulance service
- Care home sector
- Community setting (including district nursing and community psychiatric nursing)
- Consultancy
- Cosmetic or aesthetic sector
- Governing body or other leadership
- GP practice or other primary care
- Hospital or other secondary care
- Inspectorate or regulator
- Insurance or legal
- Maternity unit or birth centre
- Military
- Occupational health

Police

- Policy organisation
- Prison
- Private domestic setting
- Public health organisation
- School
- Specialist or other tertiary care including hospice
- Telephone or e-health advice
- Trade union or professional body
- University or other research facility
- Voluntary or charity sector
- Other

Scope of practice

- Commissioning
- Consultancy
- Education
- Management
- Policy
- Direct patient care
- Quality assurance or inspection

Registration

- Nurse
- Midwife
- Nurse/SCPHN
- Midwife/SCPHN
- Nurse and Midwife (including Nurse/SCHPN and Midwife/SCPHN)

Dates	Name and address of organisation	Your work setting (choose from list above)	Your scope of practice (choose from list above)	Number of hours	Your registration (choose from list above)	Brief description of your work



ENDNOTES

- ¹ SI 2002/253 as amended.
- ² SI 2004/1767 as amended.
- ³ The standards for revalidation are made under Article 19(1) of the NMC Order 2001.
- ⁴ NMC 2011.
- ⁵ The Code: Professional standards of practice and behaviour for nurses and midwives, NMC, 2015.
- ⁶ Article 10(2)(c) of the Order, Rule 13(1)(b)(ii) of the Rules.
- ⁷ Standards set under Article 19(3) of the Order.
- ⁸ Rule 3 of The Nursing and Midwifery Council (Midwives) Rules Order of Council 2012 (SI 2012/3025).
- ⁹ Standards set under Article 19(3) of the Order.
- ¹⁰ Standard set under Article 19(3) of the Order.
- ¹¹ Standards set under Article 19(1) of the Order.
- ¹² Standards set under Article 19(1) of the Order.
- ²⁴ Standards set under Article 19(1) of the Order and under rule 13(1)(b)(i) of the Rules.
- ¹⁴ Standards set under Article 19(1) of the Order .
- ¹⁵ Standards set under Article 19(1) of the Order.
- ¹⁶ Standards set under Article 19(1) of the Order.
- ¹⁷ Standards set under Article 19(1) of the Order.
- ¹⁸ Rule 13(1)(b)(i).
- ¹⁹ Rule 13(1)(a) of the Rules.
- ²⁰ Rule 13(1)(a) and paragraph 2 of Schedule 4 of the Rules.
- ²¹ Rule 13(1)(a) and Rules 6(6)(d) and 6(6)(e).
- ²² Rule 6(6)(c).
- ²³ Rule 6(6)(d) and Rule 6(6)(e).
- ²⁴ Rule 6(6)(c) of the Rules.
- ²⁵ Article 10(2)(aa) of the Order and Rule 13(1)(aa) of the Rules.
- ²⁶ Paragraph 1(h)(ii) of Schedule 4 of the Rules.
- ²⁷ Rule 13(1)(d) of the Rules.
- ²⁸ Rule 3 of The Nursing and Midwifery Council (Midwives) Rules Order of Council 2012 (SI 2012/3025).
- ²⁹ Rule 13(1)(d) of the Rules.
- ³⁰ Rule 14(5) of the Rules.
- ³¹ We cannot extend any application beyond three months. Rule 14(5) of the Rules.
- ³² Rule 13(1)(d).
- ³³ Article 44 of the Nursing and Midwifery Order 2001.
- ³⁴ Article 37(1)(a) of the Order.
- ³⁵ Article 37(1)(a) of the NMC Order 2001 and the Rules 19, 20 and 21 of the Registration Rules.
- ³⁶ Article 37(2) of the Order.
- ³⁷ Article 44 of the Nursing and Midwifery Order 2001.



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