 <p>Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg University Health Board</p>	<p><b>Reference Number: WOD 68</b>  <b>Version Number: 1.0</b>  <b>Next Review date: 00/00/00</b></p>
<p align="center"><b>Cwm Taf Morgannwg University Health Board (CTMUHB) Nursing &amp; Midwifery Revalidation Policy</b></p>	
<p><b>Introduction</b></p> <p>There is a legal and contractual requirement for all individuals employed as a registered nurse or midwife within the United Kingdom, to be revalidated every three years (and registered every year) with the Nursing and Midwifery Council (NMC).</p> <p>The purpose of this policy is to set out a framework to ensure that effective systems are in place within Cwm Taf Morgannwg University Health Board (CTMUHB) to verify the revalidation status of all staff employed as registered nurses and midwives.</p>	
<p><b>Objectives</b></p> <p>Cwm Taf Morgannwg University Health Board (CTMUHB), aims to support managers of nurses and midwives with the NMC requirements, to revalidate nursing and midwifery registration.</p> <ul style="list-style-type: none"> <li>• Sets out the overarching responsibilities of the managers of nurses and midwives within the organisation in supporting individuals to meet the requirements of the NMC revalidation process.</li> <li>• Makes explicit the personal responsibility of individual nurses and midwives to meet revalidation requirements with the NMC.</li> <li>• Provide guidance to managers in the event of a lapsed registration of a nurse or midwife.</li> </ul>	
<p><b>Operational Date</b></p> <p>00/00/0000</p>	<p><b>Expiry Date</b></p> <p><b>Formal</b> – three years  <b>Informal</b> – one year</p>
<p><b>Scope</b></p> <p>This policy applies to all staff on all locations across CTMUHB.</p>	
<p><b>Equality Impact Assessment</b></p>	<p>An Equality Impact Assessment has been undertaken.</p>

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<b>Distribution</b>	All staff via internet and team briefings.
<b>To be read by</b>	All managers of registered nurses & midwives will need to be aware of the policy.
<b>Documents to read alongside this Policy</b>	All Wales Disciplinary Policy Professional Registration Policy
<b>Approved by</b>	Workforce Policy Review Group, Local Partnership Forum, People and Culture Committee
<b>Accountable Executive / Lead Director</b> (responsible for formal review every three years)	Executive Director of Nursing and Patient Care
<b>Author / Management Lead</b> (carries out informal review annually)	Pauline Griffiths, Senior Nurse Revalidation
<b>Freedom of Information Status</b>	Open
<p><b>If the review date of this policy has passed, please ensure that the version you are using is the most up to date either by contacting the document author or the Corporate Services Department.</b></p> <p><b>To avoid use of out of date policies please do not print and then store hard copy of this document.</b></p> <p><b>Out of date policies cannot be relied upon.</b></p>	

**Max 2 pages to this point**

### **Amendment Record**

If a change has been made to the document, the changes must be noted and circulated to the appropriate colleagues.

<b>Detail of change</b>	<b>Why change made?</b>	<b>Page number</b>	<b>Date of change</b>	<b>Version</b>	<b>Name of Policy Author</b>

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## **1. PURPOSE**

The Nursing & Midwifery Council (NMC) is the regulator of nursing and midwifery in England, Wales, Scotland, Northern Ireland and the Islands. The NMC exists to safeguard people (the public) who use or need the services of registered nurses and midwives. The NMC is a statutory body and its responsibilities are set out in the Nursing and Midwifery Order 2001.

Revalidation is a triennial process which includes:

- a. Practice Hours.
- b. Continued Professional Development.
- c. Feedback on Practice.
- d. Reflection.

(see Appendix 1 for detailed information on the requirements to meet sections a–d).

- e. Professional Development Discussion.
- f. Confirmation.
- g. Submission to the NMC to include self-declaration of Health, Character and Indemnity arrangements.

Nurses and midwives are also required to renew their registration every year with the payment of an annual fee. Renewal of registration has a separate policy: Professional Registration. This policy (Revalidation) should be read in conjunction with the Professional Registration Policy.

## **2. POLICY STATEMENT**

The NMC hold a register of every nurse and midwife who has fulfilled the NMC registration requirements and are therefore eligible to practice in the UK.

From April 2016 all registered nurses and midwives are required to apply for revalidation with the NMC every three years. This application must take place within the 60 day period that precedes the 1<sup>st</sup> day of the month in which their annual registration fee is payable for that year.

The primary purpose of revalidation is to improve public protection by making sure that registered nurses and midwives can demonstrate their continued ability to practise safely and effectively throughout their careers.

Failure to successfully complete the revalidation processes will result in the registered nurse or midwife being lapsed from the NMC Register.

### **3. PRINCIPLES**

Both the individual practitioner and Cwm Taf Morgannwg University Health Board (CTMUHB) have a responsibility to ensure that individuals practising as registered nurses or midwives have the necessary qualifications and registration to perform their role. This policy/guidance:

- Makes explicit the personal responsibility of individual nurses and midwives to meet revalidation requirements with the NMC.
- Sets out the overarching responsibilities of the managers of nurses and midwives within the organisation in supporting individuals to meet the requirements of the NMC revalidation process.
- Details the Senior Nurse Managers (or equivalents) responsibility to ensure robust internal systems and processes are in place, to provide assurance to the Health Board's Executive Nurse Director, of the revalidation (and registration) status of all individuals employed as registered nurses or midwives within their area of accountability.

### **4. SCOPE**

This policy will apply to all registered nurses and midwives and those that directly line manager them.

### **5. LEGISLATIVE AND NHS REQUIREMENTS**

NMC Requirements for Nursing and Midwifery Registration.

Equality Impact Assessment.

### **6. PROCEDURE**

#### **6.1 Revalidation Overview**

Revalidation is an NMC requirement. Completing the revalidation process in a timely manner is the responsibility of the individual registered nurse or midwife as they are the owners of their own revalidation.

Revalidation gives registered nurses and midwives, the opportunity to continue to develop their professional knowledge and show their

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professionalism to those with whom they come into contact with throughout their working lives.

The NMC requirements for revalidation are set out in Appendix 1 of this policy. The collection of appropriate evidence should be a continual process taking place over the whole three year cycle prior to each revalidation date.

This policy statement along with locally developed systems and processes which support it, ensure that any risks associated with individual registered nurses or midwives, failing to comply with the revalidation process set out by the NMC, are mitigated.

Revalidation is not an assessment of a registered nurse or midwife's fitness to practice. Any fitness to practice issues must be addressed as soon as they are identified, according to existing NMC and Cwm Taf Morgannwg University Health Board (CTMUHB) processes and policies. e.g. [Disciplinary Policy](#) and [Professional Registration Policy](#).

Staff will be required to follow all local arrangements that support the revalidation process. The local arrangements for CTMUHB are set out in Appendix 2.

## **6.2 The Responsibility of the Individual Nurse or Midwife**

Every registered nurse and midwife wishing to maintain their registration will be required to complete the revalidation process. Failure to successfully do so will result in the registered nurse or midwife being lapsed from the NMC register and they will not be permitted to work.

It is the individual registrant's responsibility to know their Revalidation date, however, to support this the NMC will inform registered nurses and midwives that their three yearly revalidation is due 60 days before the revalidation date.

Submission of the revalidation request for individual nurses and midwives must be made electronically directly to the NMC via the individual's online NMC account.

Any registered nurse or midwife who is found to have deliberately falsified evidence or made a false declaration may be subject to internal disciplinary processes and will be referred to the NMC for alleged breach of the NMC Code. This may involve fitness to practice proceedings being instigated against the registered nurse or midwife by the NMC.

Registered nurses and midwives are required to notify CTMUHB at the earliest opportunity of any factors that might impact on their ability to revalidate, including delay in payment of fees, completion of revalidation requirements and referral by any party to the NMC.

It is the responsibility of the individual to ensure that they have sufficient funds in their account to cover the required renewal payment (either on an annual or quarterly basis) which accompanies the revalidation submission to the NMC (N.B. if an individual changes their bank account they must ensure that the required details of the NMC direct debit are checked accordingly). Please see [www.nmc.org.revalidation.org.uk](http://www.nmc.org.revalidation.org.uk).

Any change in circumstances during the 3 year cycle, e.g. in health, or character issues, cautions or convictions, must be communicated to the NMC, by the registrant, in accordance with NMC guidance. (Please refer to the NMC guidance on Health and Character within the Revalidation document) [www.nmc.org.revalidation.org.uk](http://www.nmc.org.revalidation.org.uk)

Any registered nurse or midwife who allows their registration to lapse will need to make a formal application to the NMC for re-admission to the register. This process can take between two and six weeks (see Appendix 4).

### **6.3 Responsibility of Line Managers of Nurses and Midwives**

Ward sisters, charge nurses, team leaders, professional leads and operational team leaders may provide reminders to the registrant of their forthcoming revalidation date although it is ultimately the responsibility of the individual to know this date.

Ward sisters, charge nurses, team leaders, professional leads and operational team leaders have responsibility to CTMUHB to ensure that registrants have timely access to revalidation support materials, reflective discussion and confirmation and that the necessary revalidation paperwork is completed accordingly, allowing the individual to revalidate. This may include "bank only" nurses and midwives, who are solely working in one area on a regular basis.

Ward sisters, charge nurses, team leaders, professional leads and operational team leaders have a responsibility to support any nurse or midwife who reports any issue that might result in a delay in meeting the NMC revalidation requirements.

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By law, registered nurses and midwives can keep their portfolio and revalidation evidence in Welsh if they wish. They can request in advance that their reflective discussion and confirmation is undertaken through the medium of Welsh. If the identified line-manager is unable to facilitate this then an appropriate substitute must be identified by the line-manager.

Best practice would see all registered nurses and midwives producing evidence in relation to revalidation at each annual appraisal. Also in the year of revalidation, the reflective discussion and confirmation will be completed with the line manager (or other appropriate identified person) e.g. where a registrant is managed by a Directorate Manager, the registrant may have the Reflective Discussions with the nurse professional lead and the directorate manager may wish to confirm the revalidation portfolio.

Where a registrant does lapse their registration, the ward sisters, charge nurses, team leaders, professional leads and operational team leaders must ensure that they inform the registrant that they cannot work as a Registered Nurse or Midwife in any organisation. They must inform the individual in writing that they will be required to take authorised unpaid leave and notify payroll accordingly (see Appendix 5).

#### **6.4 Responsibility of Senior Nurse Managers (or equivalent)**

Cwm Taf Morgannwg University Health Board (CTMUHB) will record the minimum data set of renewal and revalidation information, the Electronic Staff Record (ESR) is available for this purpose.

Robust internal systems and processes must be in place within the organisation to provide assurance to the organisation's Executive Nurse Director of the revalidation (and registration) status of all individuals employed as registered nurses or midwives in their area of accountability.

CTMUHB is not obligated to inform registered nurses or midwives that their revalidation is due, it is the responsibility of the individual to maintain their revalidation during their employment with CTMUHB, and this includes during any break of employment such as maternity leave, sick leave and/or career break. However, the employer must have systems in place to support registrants during such times.



The Heads of Nursing/Midwifery has delegated responsibility for ensuring registrants have timely access to revalidation support materials, a reflective discussion and confirmation and that the necessary revalidation paperwork is completed allowing them to revalidate accordingly.

The Executive Director of Nursing has Board level accountability for establishing processes to ensure that all registered nurses and midwives employed by CTMUHB have the necessary qualifications and registration to perform their role.

### **6.5 The Reflective Discussion**

The NMC require that every registered nurse and midwife must discuss their five written reflective accounts with an NMC registered nurse or midwife in order to comply with this element of the revalidation requirements. This must be undertaken at one time.

Whilst the NMC states that it is up to an individual registered nurse or midwife to decide the most appropriate person to have their reflective discussion with, within CTMUHB, it is expected that any employee who undertakes the reflective discussion with another registered nurse or midwife :

- Must be on the NMC register but does not need to be on the same part of the register (a registered nurse can have a reflective discussion with a midwife and vice versa).
- Should ideally be the registered nurse or midwife's line-manager/professional lead.
- Have an in-depth understanding of their accountability for the decision to undertake a reflective discussion for a registered nurse or midwife's evidence.
- Be recognised by CTMUHB as being suitable to fulfil the role of professional discussion partner.
- Should work with the registered nurse or midwife frequently or be from a professional network or learning group, although they do not need to work with them on a daily basis or undertake the same type of practice.

**Or**

- Should be senior to, or more experienced than the registered nurse or midwife.
- Must be able to facilitate a critically reflective discussion with the registered nurse or midwife.

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- Must agree to be contacted by the NMC to provide further information if necessary for verification purposes.

The record of the reflective discussion should be stored in the practitioner's professional portfolio, the information will be stored on the registrants ESR record.

If the registered nurse or midwife facilitating the reflective discussion knowingly makes a false declaration about the conduct or process of the discussion then they may be subject to internal disciplinary processes.

They may also be referred to and investigated by the NMC for alleged breaches of the NMC Code, which may involve fitness to practice proceedings being instigated against the registered nurse or midwife.

The reflective discussion must take place before the Confirmation.

## **6.6 The Confirmation**

The NMC strongly suggest the confirmation should be undertaken by the manager as part of the appraisal process. However it is recognised, there are a number of nurses and midwives who are not directly line managed by a registered nurse or midwife. In such circumstances, they can obtain their confirmation from another healthcare professional that they work with and who is regulated in the UK, e.g. doctor, pharmacist.

Employers may decide to hold registers of prepared confirmers. This should be held in the electronic staff record.

CTMUHB provides Confirmer Training for all band 6 (and above) nurses and midwives. Once training is complete the training is recorded in the individual's ESR record.

Best practice would see all staff who act in the role of a confirmer undergo appropriate preparation as determined by CTMUHB (refer to Training Implications page 26).

Every registered nurse and midwife must obtain confirmation that they have demonstrated, through the production of the required evidence, their compliance with the revalidation requirements.

The process of obtaining confirmation every three years will ordinarily take place during the existing appraisal process.

Confirmation can take place at any point in the 12 months prior to the registered nurse or midwife's revalidation date, providing all other requirements of the revalidation requirements have been met.

Within CTMUHB the confirmation process will form part of the role responsibilities of all line-managers of registered nurses and midwives. Should there be circumstances whereby this approach is not felt to be appropriate, a registered nurse or midwife can make a formal request to the CTMUHB to be assigned to a different confirmer.

Similarly, confirmers can make a formal request for their staff member to be assigned to a different confirmer. It is anticipated that such a situation will only arise in exceptional circumstances.

There is no expectation that the confirmer will seek external verification of the evidence that the registered nurse or midwife provides. The confirmer is expected to act honestly and in good faith, and neither CTMUHB nor the NMC will take action against a confirmer who inadvertently provides information that later proves to be incorrect. A copy of the NMC registration confirmation must be placed in the individual's personal file.

All registered nurses or midwives have the right to appeal to the Executive Director of Nursing of CTMUHB if they feel that an incorrect decision has been made about their confirmation. This appeal must be made in writing within two weeks of the original decision. CTMUHB will be required to make arrangements for a senior member of staff to investigate the appeal. This investigation should be undertaken in a time frame that is mindful of the registrants' revalidation date.

In addition to supporting substantive registrants to prepare their Revalidation portfolio, CTMUHB is committed to supporting Bank nurses and midwives to complete the requirements of their reflective discussion and confirmation of portfolio. (Appendix 2)

### **6.7 Absence from work at the time of Revalidation**

Any registered nurse or midwife who is on long term sick leave can have their confirmation discussion as part of their regular meetings in line with the Managing Attendance at Work Policy ([Managing](#)

[Attendance at Work Policy.pdf](#)). If the practitioner is too unwell to participate in the confirmation process and their revalidation date is approaching, then the NMC can be contacted by the registrant to consider an extension to the registered nurse or midwife's revalidation date. It is expected that the line manager will support the registered nurse or midwife with this extension application process. Information on application for an extension/extenuating circumstances can be found in Appendix 5.

Where staff know they will be on maternity leave and their revalidation date falls within the period where they are expected not to be in work, preparation is essential. The registered nurse or midwife should arrange with their confirmer to complete the process before their maternity leave commences or as part of the arrangements for the 'keeping-in-touch' days.

Similarly, registered nurses or midwives who take a career break of sufficient length not to be able to meet the 450 practice hour requirement over three years (or 750 hours over five years) will need to undertake a Return to Practice Course.

Where a registered nurse or midwife is suspended or undergoing a disciplinary investigation or been referred to the NMC when their confirmation is due, this should not affect their confirmation and appropriate arrangements must be put into place by CTMUHB to accommodate this process.

## **6.8 Legal Requirements for Revalidation and Lapsed Registration**

If a registered nurse or midwife does not submit their revalidation application in accordance with the NMC requirements then their registration will lapse.

Where a registrant lapses their registration, they must:

- Apply to the NMC for readmission to the register (Appendix 3). This can take between 2-6 weeks.
- During this period of time, the registrant will not be permitted to work.
- The registrant is able to apply for accrued annual leave for the first week of the lapse subject to approval, in line with their normal weekly contracted hours.

The line manager must:

- Inform the individual in writing (print Appendix 5 of this policy) of the breach of contract of employment and the requirement to apply for authorised unpaid leave.
- Complete the on-line Payroll ESR Exception Form <http://nww.employmentservices.wales.nhs.uk/useful-documents-ct> . On return to the register, advise payroll of date to reinstate pay.

The employee would have the opportunity to consider this option and respond in writing within 7 calendar days accepting authorised unpaid leave as a variation in their terms and conditions as an alternative to dismissal. An alternative to dismissal does not remove the employee's right of appeal against the original decision to dismiss.

Where an individual's registration has lapsed and the individual has continued to work, a file note must be included in the nurse/midwife's personal file, to record the period of time that they practised as a registered nurse or midwife, whilst not on the NMC register. An initial assessment of facts needs to be undertaken by the Line Manager to identify whether any patients have come to harm during this period.

The individual may be subject to investigation under the All Wales Disciplinary Policy. The All Wales Disciplinary Policy sets out that any fundamental breach of Contract of Employment, which makes continuation of employment impossible, is deemed to be gross misconduct. Failure to revalidate (and/or maintain registration) is a clear example of a fundamental breach of the Contract of Employment which might lead to summary dismissal without notice or payment in lieu of notice or action short of.

An alternative method of dealing with this disciplinary offence is 'other form of action short of dismissal', e.g. Fast Track Disciplinary. This will be considered by CTMUHB on a case by case basis and may include an emergency application of authorised unpaid leave by the nurse or midwife, during which time the nurse, midwife and their employer must ensure that they communicate regularly with each other.

It is the registrant's responsibility to monitor their NMC status and advise the manager of the date they are returned to the register. It is also the overarching responsibilities of the managers to monitor when the individual is re-registered by the NMC. During this time the individual is required to keep in contact with their line manager.

The subsequent return of the registered nurse or midwife to their post and/or the resumption of pay will be subject to the confirmation of registration status.

## **7. TRAINING IMPLICATIONS**

Revalidation awareness training will be provided on Graduate Induction programmes and upon individual request.

Confirmer training will take place on Band 6 development days, and upon individual request.

Upon completion of Confirmer training, the individual ESR record of the attendee will be updated with this one off training competency.

A record of all Confirmer's is held by CTMUHB.

## **8. REVIEW, MONITORING AND AUDIT ARRANGEMENTS**

This policy will be reviewed every 3 years, additional reviews may be required if any changes are made to Legislation or Terms and Conditions of Service apply.

## **9. MANAGERIAL RESPONSIBILITIES**

Managers must take overall responsibility for ensuring that this policy is implemented and monitored effectively, they must ensure that all of their employees are aware of their responsibilities.

## **10. RETENTION/ARCHIVING**

The Director of Workforce and Organisational Development will ensure that copies of this policy are archived and stored in line with CTMUHB records management policy, and are made available for reference purposes should any situation arise where they are required.

## **11. NON CONFORMANCE**

All employees are expected to comply with this policy, failure to comply with the policy is a serious offence and could result in disciplinary action.

## **12. EQUALITY IMPACT ASSESSMENT STATEMENT**

This policy has been subject to a full Equality Impact Assessment and no implications found.

## **13. REFERENCES**

<http://www.nmc.org.uk/globalassets/sitedocuments/legislation/legislation-updated/nmc-original-legislation-and-amendments.pdf>

<http://revalidation.nmc.org.uk/download-resources/guidance-and-information/>

**Appendix 1**

**NMC Requirements for Revalidation**

**Practice Hours**

Each nurses and midwife must have practiced for a minimum of 450 hours over the three year period since their registration was last renewed or since they joined the register.

To maintain dual registration individuals must have undertaken a minimum of 900 hours over the three year period since their registration was last renewed or since they joined the register. This must include at least 450 hour for nursing and 450 hours for midwifery.

The practice hours may include providing direct care to patients, but can also include managing teams, teaching, strategic management activities or nursing and midwifery research.

The practice hours must reflect the individual's current scope of practice, but do not have to be related to the original field of practice when the nurse or midwife first joined the register.

The hours that count towards this requirement are those in which the individual relies on their knowledge, skills and experience as a registered nurse or midwife.

The NMC recommend that practice hours are recorded on a template, the practice hours will need to be available for the confirmer to review to ensure you have met the requirement.

**Continued Professional Development**

Each nurse and midwife must have undertaken a minimum of 35 hours of CPD relevant to their scope of practice over the three year period since their registration was last renewed or since they joined the register.

Of the 35 hours, at least 20 hours must be participatory learning, i.e. an activity that involves interaction with one or more other professional either in a physical or virtual environment.



The individual must maintain accurate records of CPD including: the CPD method, a description of the topic and how it relates to practice, the date(s) the activity was undertaken, the number of hours (including the number of participatory hours), identification of the part(s) of the Code most relevant to the activity as well as providing evidence that the individual undertook the CPD activity.

### **Feedback on Practice**

Nurses and midwives must have obtained five pieces of practice-related feedback in the three year period since their registration was last renewed or since they joined the register.

Feedback can come from a variety of sources (i.e. patients, service users, colleagues or managers) and in a variety of forms (i.e. written, verbal, formal or informal), this list is not exhaustive.

The NMC recommend that a record of the feedback is maintained, taking care not to include any identifiable information about another person.

### **Reflective Account**

Registrants are required to prepare five written reflective accounts in the three year period since registration was last renewed or they joined the register.

The reflective accounts must be recorded on the approved NMC form and must refer to an instance of CPD and/or a piece of practice related feedback and/or an event or experience in the individuals own professional practice.

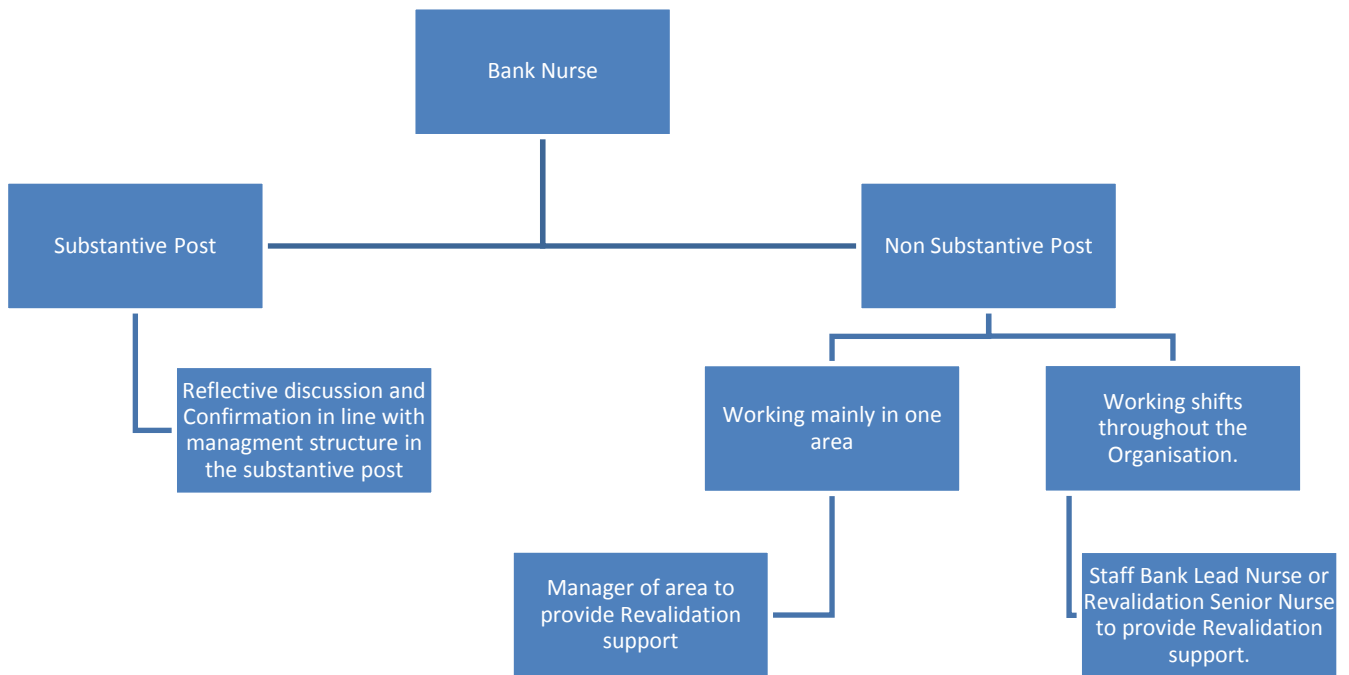
The reflective account must demonstrate how the reflection relates to the Code.

The reflective account must not include any information that might identify an individual whether that individual is alive or deceased.

**Appendix 2**

**Local arrangements for Supporting Revalidation of CTMUHB  
Substantive Registrants and Bank Only Registrants**

**Reflective Discussion and Confirmation Process**



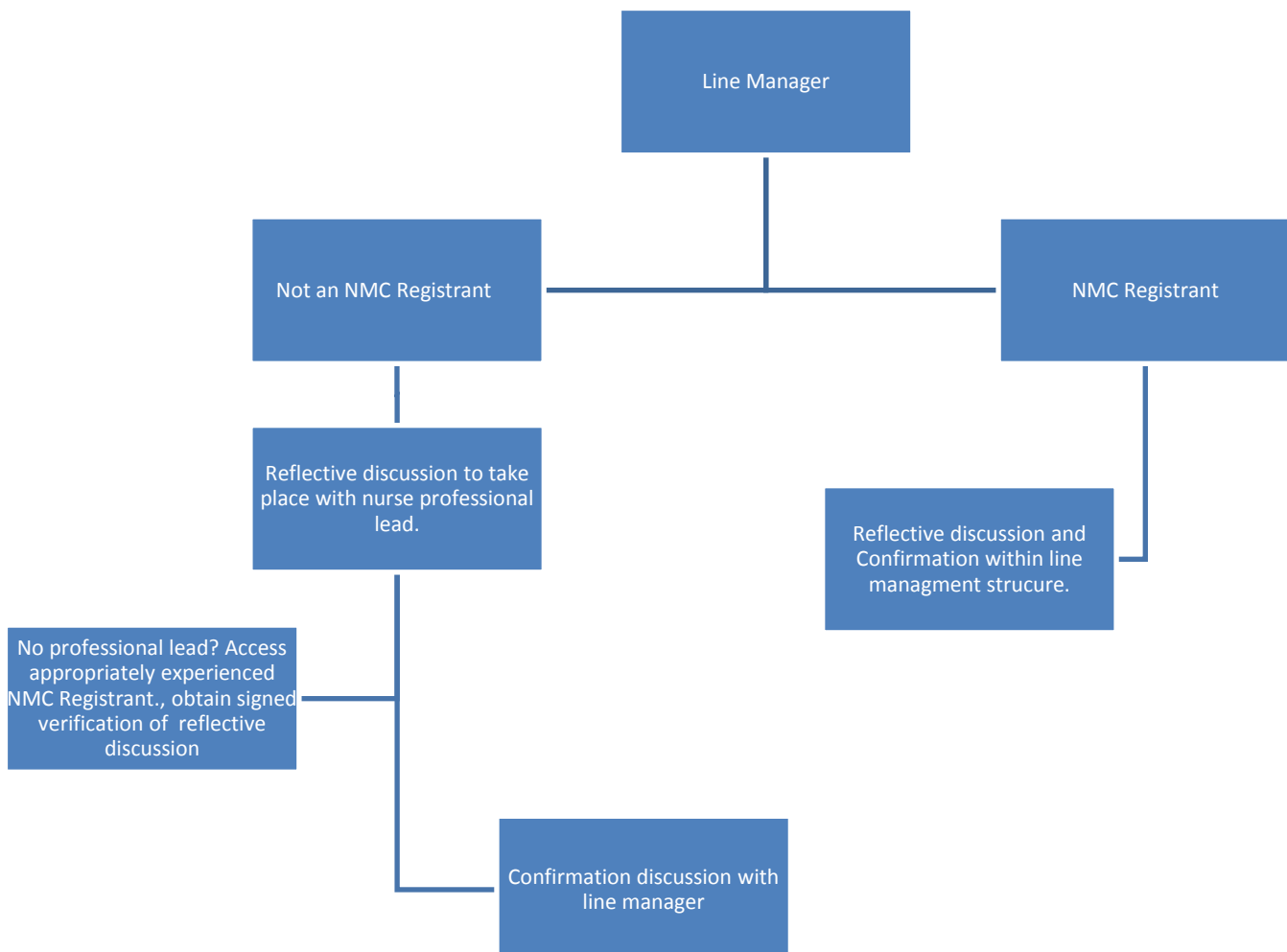
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### **Supporting Bank Nurses & Midwives with Reflective Discussion and Confirmation**

Where “bank only” nurses and midwives are solely working in one area on a regular basis, they should have their reflective discussions and confirmation with a line manager in that area.

Where “bank only” nurses and midwives work across a number of different locations, directorates and sites within CTMUHB, their reflective discussion and confirmation could take place with the Registered Nurse responsible for the Staff Bank, or the Senior Nurse responsible for Nurse Revalidation.

### **Registered Nurses & Midwives Reflective Discussion and Confirmation Process**



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**Appendix 3**

**Process to Manage Lapsed Registration**

- Registrants line manager to notify their Senior Nurse/Manager and the Workforce and OD Department.
- Senior Nurse/Manager to notify Executive/Deputy Director of Nursing.
- Senior Nurse/Manager to notify Workforce and OD Lead.
- Senior Nurse/Manager to contact registrant to arrange a face to face meeting, followed up with relevant letter (Appendix 5).
- Registrant advised accrued annual leave (if applicable) can be used for the first week of the lapse.
- Senior Nurse/Manager to complete electronic ESR Exception Form and send to payroll (link on p.14)

**On Return to the Register**

- Registrant to produce proof of updated registration to their Senior Nurse/Manager.
- Line Manager to notify Senior Nurse Manager, Workforce and OD and Payroll Departments.

**Appendix 4**

**Reapplication to Register - Readmission Requirements**

The readmission requirements vary, depending on when a registrant has lapsed their registration, and whether sufficient hours have been practised.

1. Most people who want to re-join the NMC register and are applying for readmission will need to meet the general readmission requirements.
2. If the registration has lapsed within six months of the original revalidation date, then the registrant will be required to complete some of the revalidation requirements.

Further information is available in the NMC 'Checklist of Requirements' and 'Details of Requirements' pages.

**The Process**

In most circumstances you can apply for readmission through your **NMC Online account**.

When you log in to your NMC Online account there will be an alert inviting you to make an application for readmission. More details on the readmission process can be found in the 'How to Apply for Readmission' section available at:

<https://www.nmc.org.uk/registration/returning-to-the-register/readmission-register/>

**NMC Contact Details**

Telephone: 020 7333 9333 or  
[www.revalidation.escalation@nmc-uk.org](mailto:www.revalidation.escalation@nmc-uk.org)

**Appendix 5**

**Letter to Registrant**



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board

Your ref/eich cyf:  
Our ref/ein cyf:  
Date/Dyddiad:  
Tel/ffôn:  
Fax/ffacs:  
Email/ebost:  
Dept/adran:

**Private & Confidential**

Dear ....

**Re: Lapsed Registration to the Nursing and Midwifery Council (NMC)**

It has come to my attention that you have failed to renew your registration by not submitting your revalidation request / making payment to the NMC at the appropriate time and have therefore lapsed from the register **insert date**. This means that you are no longer allowed to practice as a registrant until your registration is renewed and you are reinstated onto the NMC Register.

There is a legal and contractual requirement for all individuals employed as a registered nurse or midwife in the UK to be revalidated and registered with the Nursing and Midwifery Council (NMC). These requirements are set out in the CTMUHB and Nursing & Midwifery Council Revalidation Policy.

The NMC informs registered nurses & midwives at least six weeks before their revalidation / renewal date, when annual fee payment for registration is due. Consequently, CTMUHB is not obliged to inform registered nurses or midwives that their revalidation / registration is due.

It is the responsibility of the individual to maintain their registration during their employment with CTMUHB, and this includes during any break of employment such as maternity leave, sick leave and/or career break.

Any registered nurse or midwife who allows their registration to lapse needs to make a formal application to the NMC for re-admission to the register. This process can take between two and six weeks.

Continuing to work as a registered nurse or midwife while not on the NMC register is illegal (article 44 of the Nursing and Midwifery Order 2001). Any registered nurse or midwife who is found to have been working whilst unregistered may be required to be referred to the NMC Registrar's Advisory Group, and may be subject to Fitness to Practice investigation.

In addition to the above, I must inform you that a registered nurse or midwife who fails to submit their revalidation and renew their registration within the specified timescales, may be investigated under the All Wales Disciplinary Policy for failing to maintain registration that allows them to practice as a registered nurse or midwife.

The All Wales Disciplinary Policy states the following as an example of gross misconduct which might lead to summary dismissal:

"Any fundamental breach of the Contract of Employment, which makes continuation of employment impossible. This category may include:

- Failure to meet statutes concerning Professional Registration.
- Failure to maintain registration as set out in the NMC Code of Conduct is a clear example of a fundamental breach of the Contract of Employment. In some cases the result may be summary dismissal without notice or payment in lieu of notice".

I understand that you have met with (**insert name of line manager**) and discussed your particular circumstances, and that you are fully aware of the implications of your lapsed registration in relation to your terms and conditions of service.

I can confirm that your decision to apply for authorised unpaid leave for the period from (**insert date**) is approved and **during this period of unpaid leave pension contributions will continue to be paid.**

**Annual leave will continue to accrue during the period of authorised unpaid leave.** Your full employment status will be resumed when you can provide evidence that your PIN Registration has been renewed.

Yours sincerely

**Senior Manager**