

NURSING & MIDWIFERY COUNCIL (NMC) REVALIDATION: A POLICY TO SUPPORT REGISTRANTS AND THEIR LINE MANAGERS

Version 1.4

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CCG owner:	Director of Quality & Nursing
Links to other policies:	<ul style="list-style-type: none"> • Policy for Performance and Development Reviews and Pay Progression • Clinical Supervision for Nurses and AHP Registrants • Conduct, Performance, Grievance & Absence Management Policy
Review date:	August 2021
For action by:	All staff employed by the CCG for whom their role and job description requires them to have an active and valid professional registration with the NMC, and line managers of such employees.
Policy statement:	The purpose of this policy is to ensure that all staff employed by the CCG for whom their role and job description requires them to have an active and valid professional registration with the Nursing & Midwifery Council (NMC), and line managers of such employees, are aware of the CCGs approach to supporting their compliance with NMC Revalidation.
Responsibility for dissemination to new staff:	Any line manager employing a UK registered nurse or midwife who is required to maintain an active NMC registration in order to fulfil their role.
Mechanisms for dissemination:	The guidance will be disseminated to all registered nurses and midwives in the CCG and also shared with all CCG teams to ensure that those line managers of registered nurses or midwives are aware of the document. In addition all new and updated policies / guidance are published on the CCG website and are promoted to staff through the staff newsletter and intranet.

Training implications:	All staff employed by the CCG for whom their role and job description requires them to have an active and valid professional registration with the NMC, and line managers of such employees. To support CCG staff 1:1 support is offered to individual registrants and their line managers.
Resource implications	Nursing & Midwifery Resources available: http://revalidation.nmc.org.uk/ To support CCG staff 1:1 support is being be offered to individual registrants and their line managers.
Further details and additional copies available from:	Website: https://westhampshireccg.nhs.uk/document-tag/clinical-and-su-policies/
Equality analysis completed?	Yes, see Appendix 2
Consultation process	Senior Nurse Forum membership: 20 Mar 16 Director of Quality & Nursing (Board Nurse) Policy Sub Group
Approved by:	Policy Sub Group
Date approved:	11 September 2019

Website upload:

Website	Location in FOI Publication Scheme	https://westhampshireccg.nhs.uk/document-tag/clinical-and-su-policies/
Keywords:	Revalidation, Registration	

Amendments summary:

Amend No	Issued	Page(s)	Subject	Action Date
1	Jan 18	5,16	Amend references to Whistleblowing & Concerns Policy to Conduct, Performance, Grievance & Absence Management Policy (V1.03)	Jan 18
2	May 19	5, 17 and 19	Inclusion of reference to NMC 2019 <i>Guidance on Health and Character</i> and removal of old website link for CCG revalidation (V1.04)	May 19

Review log:

Include details of when the document was last reviewed:

Version Number	Review Date	Reviewer	Ratification Process	Notes
1.02	May 2017	DD of Quality & Safety	Policy Sub Group	No amendments required, apart from updating review date etc
1.04	May 19	DD of Quality & Safety	Policy Sub Group	See amend 2 above

NURSING & MIDWIFERY COUNCIL (NMC) REVALIDATION: A POLICY TO SUPPORT REGISTRANTS AND THEIR LINE MANAGERS

SUMMARY OF KEY POINTS TO NOTE

- The purpose of this policy is to ensure that all staff employed by the CCG for whom their role and job description requires them to have an active and valid professional registration with the Nursing & Midwifery Council (NMC), and line managers of such employees, are aware of the CCGs approach to supporting their compliance with NMC Revalidation.
- All registered nurses and midwives are required to successfully complete Revalidation every three years to maintain an active professional registration in order to continue working in roles which require them to be a registrant / hold an active NMC professional registration.
- Where NMC registration is a requirement of CCG employment, and where employees fail to renew registration, the individual must inform their line manager and will not be able to perform as a registered nurse or midwife. Individuals will be managed in line with the Conduct, Performance, Grievance & Absence Management Policy and disciplinary action, including dismissal, may be considered.
- Under revalidation, all nurses and midwives are required to declare they have:
 - met the requirements for practice hours and continuing professional development (CPD)
 - received at least 5 pieces of feedback
 - reflected on their practice, producing five written accounts
 - had a reflective discussion with another registrant
 - have received confirmation from an appropriate individual
- In addition to the above, all nurses and midwives will be required to declare that their health and character allow them to practice safely and effectively.
- Progress against achievement of the revalidation criteria will be reviewed and signed off annually during one of the regular personal development review meetings. Three yearly confirmation and revalidation can be combined with one of these regular review meetings in the corresponding third year.
- Individual nurses and midwives will ensure they review and submit their evidence for confirmation to their confirmer at least 30 calendar days prior to the third year revalidation appraisal (or revalidation confirmation meeting) to allow time for additional evidence to be collated if required.

NURSING & MIDWIFERY COUNCIL (NMC) REVALIDATION: A POLICY TO SUPPORT REGISTRANTS AND THEIR LINE MANAGERS

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NURSING & MIDWIFERY COUNCIL (NMC) REVALIDATION: A POLICY TO SUPPORT REGISTRANTS AND THEIR LINE MANAGERS

1. INTRODUCTION AND PURPOSE

- 1.1 In October 2015 the Nursing and Midwifery Council (NMC) agreed new requirements that registered nurses (RNs) and registered midwives (RMs) (registrants) must meet when they renew their registration every three years. This process is called Revalidation. Revalidation replaced the previous post-registration education and practice (PREP) standards for nurses and midwives with effect from 1 April 2016.
- 1.2 Under revalidation, all nurses and midwives are required to declare they have:
 - met the requirements for practice hours and continuing professional development (CPD)
 - received at least 5 pieces of feedback
 - reflected on their practice, producing five written accounts
 - had a reflective discussion with another registrant
 - have received confirmation from an appropriate individual.
- 1.3 Registrants must complete successful Revalidation every three years to maintain an active professional registration or 'PIN', which is necessary for them to perform a role in the CCG which requires them to be a registrant. Maintaining NMC registration is the professional responsibility of the individual NMC registrant and not the organisation which employs them.
- 1.4 This policy outlines how West Hampshire Clinical Commissioning Group (the CCG) and the registered nurses and registered midwives employed by the CCG will meet the requirements of Revalidation.
- 1.5 The policy provides registrants and their line managers with a structure and guidance to enable clear understanding of roles and responsibilities associated with Revalidation, and clarifies the annual appraisal process as the vehicle for annual monitoring of registrant preparedness for the three-yearly Revalidation process.
- 1.6 The policy outlines the implications of failure to comply with NMC Revalidation requirements.

2. SCOPE AND DEFINITIONS

2.1 Scope

This policy relates to all staff employed by the CCG for whom their role and job description requires them to have an active and valid professional registration with the Nursing & Midwifery Council (NMC), and also to the line managers of such employees.

- 2.1.1 A registered nurse employed by the CCG in a role requiring them to hold an active NMC professional registration.
- 2.1.2 A registered midwife employed by the CCG in a role requiring them to hold an active NMC professional registration.
- 2.1.3 An individual who holds line management responsibility for any individual with either of the roles above.
- 2.1.4 This policy does not cover individuals working for the CCG in roles which do not require registration. Whilst responsibility for meeting revalidation criteria sits with them, if such individuals choose to have an active registration, they may contact either the Director of Quality & Nursing or their Deputy to discuss how they can be supported.

2.2 Definitions

2.2.1 **Registered Nurse (RN)**

A nurse who holds an active and valid professional registration (PIN) with the NMC.

2.2.2 **Registered Midwife (RM)**

A midwife who holds an active and valid professional registration (PIN) with the NMC.

2.2.3 **Registrant**

In the context of this policy this refers to an individual who is a registered nurse or registered midwife, who holds an active and valid professional registration (PIN) with the NMC.

2.2.4 **Nursing & Midwifery Council (NMC)**

The nursing and midwifery regulator for England, Wales, Scotland and Northern Ireland:

The professional body that exists to protect the public. They set standards of education, training, conduct and performance so that nurses and midwives can deliver high quality healthcare throughout their careers.

The NMC ensures that nurses and midwives keep their skills and knowledge up to date and uphold the professional standards. The NMC have clear and transparent processes to investigate nurses and midwives who fall short of their standards. They maintain a register of nurses and midwives allowed to practice in the UK

2.2.5 **Revalidation**

Revalidation is the process introduced from April 2016 that all nurses and midwives in the UK need to follow to maintain their registration with the NMC.

- 2.2.6 **Appraisal / Personal Development Review**
The annual process for CCG staff to receive an annual discussion and evaluation of their performance over the year, plans for the coming year, and identification of development needs and how they will be supported by the organisation.
- 2.2.7 **Appraiser**
The line manager or supervisor who leads an individual's annual appraisal.
- 2.2.8 **Confirmer**
The person who checks that you have met the requirements for Revalidation. See section 3.2 for further guidance relating to the Confirmer.
- 2.2.9 **Reflector**
The person who the individual registrant discusses their written reflective accounts with, as per the requirements of the NMC. This person must also be a registrant. See section 3.2 for further guidance relating to the Reflector.
- 2.2.10 **Professional Registration (Registration)**
A unique identifier (number), referred to as a PIN by the NMC, which is awarded by a licensed professional body following an individual's achievement of the standards required by the professional body. The professional registration entitles the individual to practice as a professional registrant and to undertake work which requires an individual to be a registrant of the professional body/NMC.

3. PROCESS / REQUIREMENTS

3.1 West Hampshire CCG Process

- 3.1.1 Each individual registered nurse or midwife in West Hampshire CCG will maintain a professional portfolio which provides the platform for maintaining their evidence of achieving the criteria for NMC Revalidation.
- 3.1.2 Individual registered nurses and midwives, with their CCG line managers will ensure they have identified individuals for each required role:
- Reflector
 - Confirmer
 - Appraiser.
- 3.1.3 Progress against achievement of the revalidation criteria will be reviewed and signed off annually at the personal development review / appraisal.

- 3.1.4 Three-yearly confirmation and revalidation can be combined with personal development review / appraisal in the corresponding third year.
- 3.1.5 The revalidation confirmation meeting or third year revalidation appraisal will happen at least 60 days prior to the registrants' expiry date. This is because registrants are required to complete their revalidation application to the NMC by the 1st of the month their PIN is due to expire at the end of.
- 3.1.6 Individual nurses and midwives will ensure they review and submit their evidence for confirmation to their confirmer at least 30 calendar days prior to the third year revalidation appraisal (or revalidation confirmation meeting) to allow time for additional evidence to be collated if required.

Example:

- If your renewal date is 31 May, you must have submitted your REVALIDATION application by midnight on 1 May.
- You can submit your REVALIDATION application anytime in the 60 days before 1 May, i.e. from 2 March – 1 May

- 3.1.7 Confirmation of revalidation will occur using the NMC mandated form.

3.2 Determining your Appraiser, Confirmer and Reflector

- 3.2.1 It is possible that all three roles could be performed by the same person, however, for some nurses and midwives the roles may be fulfilled by three separate people depending on your team and organisational structures. To best understand who will fulfil these roles for you, speak to your line manager or to the Deputy Director of Quality & Nursing or the Director of Quality & Nursing.

- 3.2.2 The general principles for determining who will fulfil the roles are:

- **Reflector** – The CCG recommends that this is the registrant's clinical supervisor, or a registrant of the same band or higher within their team or peer group.

Requirements of the role:

1. The reflector needs to be an NMC registered nurse/midwife.
2. They will need to complete the mandatory NMC Reflective Discussion form for each reflective practice discussion (minimum of five examples) throughout the three year revalidation period.
3. A reflective conversation with the reflector must have happened within 12 months of the registrant's revalidation date.

- **Confirmer** – This is the registrant's line manager, and where possible is also the appraiser.

Requirement of the role:

1. The NMC does not require this person to be a professional registrant.
 2. The confirmation conversation must be a face to face conversation.
 3. This confirmer checks that the registrant has collated and provided for review adequate information required to meet the criteria for revalidation.
 4. Their role is not to agree that a registrant is fit to practice, just to confirm that the registrant has provided the information required for revalidation.
- **Appraiser** – This is the registrant's line manager; the person who completes the registrant's annual appraisal / personal development review. Where possible the appraiser is also the confirmer.

Requirements of the role:

1. The appraiser does not need to be a registrant.
2. The appraiser will review the evidence gathered for revalidation on an annual basis to assist the individual nurse or midwife in ensuring they are on track to satisfy the three-yearly criteria for revalidation.
3. At the third yearly appraisal the appraiser can perform both the appraisal and confirmation role.

3.3 **Portfolios and Supporting Documentation**

3.3.1 Registered Nurses and Midwives must continue to maintain a portfolio to capture their evidence of professional activities required to support NMC Revalidation.

3.3.2 As a minimum the portfolio must include evidence of:

- Practice hours required for your registration
- 35 hours of continuing professional development, including 20 hours of participatory learning
- Practice-related feedback; at least 5 pieces over a three year period
- Evidence of practice related reflection; at least 5 reflective accounts over a three year period
- Evidence that those reflective accounts have been discussed with an NMC registrant (reflector)
- Evidence to support the registrant's health and character, particularly if they have required support or intervention for either during the revalidation period

- Evidence of professional indemnity, this could be a contract of employment in the NHS.

3.3.3 As the NMC has mandated use of a number of their templates for revalidation, the templates available from the NMC via this link are a good way to capture the evidence related to most of the items above:
<http://www.nmc.org.uk/standards/revalidation/revalidation-guidance-and-resources/>

4. ROLES AND RESPONSIBILITIES

4.1 Individual Registrant and Line Manager Responsibilities

Individual NMC Registrant Responsibility	Line Manager Responsibility
<p>Understand the changes and how these changes affect you.</p> <p>Know the difference between your Renewal (Revalidation) date and your Fee Expiry Date.</p> <p>Access and familiarise yourself with the guidance, advice, and information for registrants provided by the NMC, available at the following link: http://revalidation.nmc.org.uk/</p>	<p>Understand the changes and how revalidation affects registered nurses/midwives in your team.</p> <p>Familiarise yourself with the NMC guidance for Confirmers. This can be accessed at the following link: http://revalidation.nmc.org.uk/information-for-confirmers/</p>
<p>Make yourself aware of opportunities within the CCG and externally to ensure you are fully informed of the Revalidation requirements (e.g. webinars, web tools, twitter events, newsletters, union or professional body communications etc), and ensure you engage with those opportunities.</p>	<p>Ensure registered nurses and midwives in your team are aware of opportunities within the CCG to engage in communication around revalidation.</p>
<p>Register for NMC Online and identify your renewal/revalidation date (your three-yearly renewal/re-registration date, not your annual fee expiry/payment date).</p> <p>http://www.nmc.org.uk/registration/nmc-online/</p>	<p>Ensure nurses and midwives in your team are aware of their renewal/revalidation date.</p> <p>Know the revalidation dates for the nurses and midwives in your team.</p>

Individual NMC Registrant Responsibility	Line Manager Responsibility
Identify your reflector, confirmer, and appraiser.	Ensure you, or appropriate other, is identified and available to undertake the confirmation role, appraisal, and reflector (professional discussion) role.
Download and/or print off the NMC recommended and mandatory forms from the link above this table and start to complete them to capture the evidence you will need for revalidation.	<p>Provide support at annual appraisal to check progress with collation of the forms and evidence required.</p> <p>Where a nurse or midwife has a disability the manager will consider, record and implement any need for reasonable adjustments in order that the individual will successfully achieve revalidation. This may include providing additional time, involvement of Occupational Health and Access to Work, provision of assistive technology or software.</p>
Arrange time over the three year period to discuss the reflections with your reflector.	Provide space and time for individual nurses/midwives to have at least five reflective conversations/discussions during a three year period.
<p>Maintain a portfolio of evidence of achievement of the criteria for revalidation. Review this evidence at your annual personal development review / appraisal to ensure you are on track for achievement of the evidence required at the three-year revalidation point</p> <p>Ensure completion of the relevant paperwork for appraisal (completion of the revalidation paperwork forming part of the appraisal document for registered nurses and midwives).</p>	<p>Ensure individual nurses or midwives evidence for revalidation is reviewed at annual appraisal to support the individuals to be ready for their three-yearly revalidation.</p> <p>This will be evidenced via completion of the Revalidation paperwork included within the appraisal documentation for registered nurses and midwives.</p>

Individual NMC Registrant Responsibility	Line Manager Responsibility
<p>Access and familiarise yourself with the guidance around declaration of good health and character https://www.nmc.org.uk/health-and-character</p>	<p>Ensure that the requirements for declaration of good character are understood and adhered to. This includes consideration of any:</p> <ul style="list-style-type: none"> • Criminal proceedings • Findings by another regulatory body (including health and social care) • Conduct which may amount to a breach of the requirements of the code.
<p>Align the date of personal development review / appraisal to coincide with the appropriate lead in time for review prior to the date of submission of your application to the NMC for revalidation.</p>	<p>Align the date of personal development review / appraisal to coincide with the appropriate lead in time for review prior to the date of submission of the registrant's application to the NMC for revalidation.</p>

5. FAILURE TO COMPLY WITH NMC REVALIDATION REQUIREMENTS

- 5.1 If a registrant fails to submit their revalidation application on time they will be putting their registration at risk. The onus is on the employee to review their registration. Complete failure to revalidate will mean that a registrant will not be able to legally work in the United Kingdom within the profession.
- 5.2 Where there is a lapse in registration as a result of failure to renew, the individual registrant must inform their line manager and will not be able to perform as a registered nurse or midwife. Line managers should seek advice from their Human Resources Business Partner and inform the Director of Quality & Nursing or their Deputy.
- 5.3 Where NMC registration is a requirement of employment, and where employees fail to renew their registration, individuals will be managed in line with the Conduct, Performance, Grievance & Absence Management Policy and disciplinary action, including dismissal, may be considered.
- 5.4 **Extensions to submit Revalidation evidence to the NMC**
- 5.4.1 Registrants may apply to the NMC for an extension in renewing their registration if they have exceptional circumstances.
- 5.4.2 Extensions to submit an application for revalidation can only be made by the registrant themselves and the NMC will not usually consider requests for extensions as they expect registrants should have met the requirements for revalidation during the 3 years prior to the renewal of their registration.

- 5.4.3 Revalidation can only be delayed under exceptional circumstances. The CCG cannot make applications on behalf of registrants for extensions or exceptional circumstances.
- 5.4.4 Should a registrant feel they may be eligible for an extension or have exceptional circumstances they should contact the NMC as far in advance of their revalidation date as possible.

6. TRAINING

- 6.1 There are no specific training implications relating to this policy.
- 6.2 This policy does not affect the individual registrant's responsibility to undertake appropriate and relevant continuing professional development as required by their registration, including accessing relevant statutory and mandatory training as provided by the CCG.
- 6.3 All individuals with line management responsibilities of a registrant should ensure they have familiarised themselves with the NMC guidance for Confirmers.
- 6.4 Any individual who is unsure of their responsibilities should contact the CCG Deputy Director of Quality & Nursing or the Director of Quality & Nursing for more advice.
- 6.5 Advice on considering the needs of nurses or midwives who have (or develop) an impairment or health problem can be obtained from Occupational Health and the Disability Employment Adviser at the local Jobcentre Plus office. Technical guidance is also available in the Equality Act 2010 Employment Code of Practice.

7. EQUALITY ANALYSIS

- 7.1 This policy has been subject to an equality impact assessment (see Appendix Two) in line with the CCG's commitment to equality and diversity and our duties under the Public Sector Equality Duty (Equality Act 2010).
- 7.2 The impact assessment identified potential negative equality impacts for nurses and midwives who have (or develop) an impairment or health condition. Also for employees registered with the NMC who work part-time or take the longest period of maternity leave. Because revalidation with the NMC is a three yearly process however, these potential negative impacts are reduced. The policy has been amended to include a 'check point' as part of staff appraisals and guidance for managers on considering reasonable adjustments. These changes minimise the risk of negative impact, and advance equal opportunities for the protected characteristic staff groups identified.

8. SUCCESS CRITERIA / MONITORING THE EFFECTIVENESS OF THE POLICY

- 8.1 The CCG monitors registrant employees' registration status monthly and will identify if individual registrants have not maintained their registration through valid fee renewal or Revalidation.
- 8.2 The CCG will inform individual registrants and line managers appropriately if the CCG becomes aware that a registrant has not maintained a valid PIN / registration.
- 8.3 This policy identifies specific forms to support registrants and their line managers for effective Revalidation preparedness vis the annual appraisal process (Appendix 1).
- 8.4 Monthly monitoring of professional registration information will provide the CCG with assurance that the policy is being adhered to. Equally, the appraisal documentation at Appendix 1 could be audited if the CCG required additional assurance of implementation and adherence to this guidance.

9. REVIEW

- 9.1 This document may be reviewed at any time at the request of either the Staff Forum or management, but will automatically be reviewed on a biennial basis, or sooner if the guidance from the NMC changes in relation to Revalidation.
- 9.2 In line with the equality impact assessment, the policy review will include: checking the implementation of the 'check point' within appraisals; and whether staff with a disability have a need for reasonable adjustments considered to ensure their successful revalidation.

10. REFERENCES AND LINKS TO OTHER DOCUMENTS

The Nursing and Midwifery Council (NMC) 2016 *Revalidation. Your step-by-step guide* [online] Available at: <http://revalidation.nmc.org.uk/> [Accessed 13.06.2019]

The Nursing and Midwifery Council (NMC) 2019 *Guidance on Health and Character*. Available at <https://www.nmc.org.uk/health-and-character> [Accessed 13.06.2019]

Confirmation of NMC Revalidation Requirements: Documentation to Support Preparedness at Appraisal

The following pages are only required if you are on the NMC register

Please print this document and add it to your appraisal / personal development review paper work

Name	
Job Title	
Date	

Confirmation of professional / clinical competence

Clinical and professional requirements

This section confirms that you have shown evidence of competence to your manager e.g. proof of up to date PIN/registration, relevant CPD, relevant reflections and evidence of changes to your practice as a result of the CPD and or patient/service user/peer feedback in order for registered nurses/health visitors/midwives to revalidate with the NMC. It is important that managers have confidence that their people are getting the professional/clinical support they need on a regular basis, and that everyone is working to maintain their competence. Check with your manager if you are unsure what paperwork to bring along to your meeting.

Clinical or professional requirements to maintain current role (for NMC revalidation only: practice hours, CPD, feedback and reflections/changes in practice linked to Code of conduct)	Your (employee) comments and Evidence available to confirm requirements Yes/No	Manager comments and Evidence available to confirm requirements Yes/No
1. <i>I have maintained sufficient Practice Hours towards my 450 hours total practice over 3 years to allow Revalidation?(450 hrs = 12 weeks over 3 years based on 37.5 hour weeks)(900 hours over 3 years required for dual registration holders)</i>		
2. <i>I can evidence that I have sufficient CPD of 35 hours over a 3 year period, of which 20 hours were participatory (learning with others) to allow Revalidation?</i>		

Clinical or professional requirements to maintain current role (for NMC revalidation only: practice hours, CPD, feedback and reflections/changes in practice linked to Code of conduct)	Your (employee) comments and Evidence available to confirm requirements Yes/No	Manager comments and Evidence available to confirm requirements Yes/No
<p>3. <i>I can evidence that I have gathered 5 pieces of Feedback related to my practice either from: patients, service users, carers, students or peers, or service or organisation from which I have been able to learn in the three year period for revalidation?</i></p>		
<p>4. <i>I can demonstrate that I have completed relevant reflective accounts using the NMC template to show how either my CPD, or feedback have changed my practice and how this links to the relevant sections of my code of conduct?</i></p> <ul style="list-style-type: none"> • <i>Prioritise people</i> • <i>Practice effectively</i> • <i>Preserve safety, and</i> • <i>Promote professionalism and trust</i> 		

Clinical or professional requirements to maintain current role (for NMC revalidation only: practice hours, CPD, feedback and reflections/changes in practice linked to Code of conduct)	Your (employee) comments and Evidence available to confirm requirements Yes/No	Manager comments and Evidence available to confirm requirements Yes/No
<p>5. <i>Health & Character Declaration – Any concerns, issues need to be discussed with your line manager and evidence produced regarding the list below over the last 3 years of relevant practice for your personal revalidation/registration period:</i></p> <ul style="list-style-type: none"> • <i>You need to declare if you have received any “convictions” or “formal caution” in the last 3 years of your registration period</i> • <i>Discuss if you have any current or pending investigations that affect or relate to your own practice (internal or external ones like NMC)</i> • <i>Discuss if you have had any complaints upheld about your own practice</i> • <i>Confirm you are in a state of health that ensures that you are capable of “safe and effective practice - without supervision, following reasonable adjustments made by my employer”</i> <p><i>If you have evidence in relation to the bullet point list above then discuss them in detail with your Line Manager during appraisal – and ensure your Sign Off “Confirmer” is aware at least 3 months prior (or as soon as possible) to your revalidation date.</i></p>		

Clinical or professional requirements to maintain current role (for NMC revalidation only: practice hours, CPD, feedback and reflections/changes in practice linked to Code of conduct)	Your (employee) comments and Evidence available to confirm requirements Yes/No	Manager comments and Evidence available to confirm requirements Yes/No
<p>6. <i>Clinical competencies for role:</i></p> <ul style="list-style-type: none"> • <i>I am up to date with my relevant clinical competencies for my role</i> • <i>I have relevant up to date clinical competence for any additional parts of the NMC Register (i.e. Nurse Prescribing)</i> • <i>Other professional requirements or comments</i> 		
<p>7. <i>Clinical Supervision (CCG local requirement)</i></p> <p><i>I have participated in receiving clinical or professional supervision, in line with CCG policy, on at least a quarterly basis.</i></p>		

EMPLOYEE NAME: _____ **SIGNATURE:** _____ **DATE:** __/__/__

MANAGER NAME: _____ **SIGNATURE:** _____ **DATE:** __/__/__

Equality analysis

Title of policy, project or proposal:

Nursing & Midwifery Council (NMC) Revalidation: A Policy to Support Registrants and their Line Managers

Name of lead manager: Deputy Director of Quality & Nursing

Directorate: Quality & Nursing

Q1 What are the intended outcomes of this policy, project or proposal?

This policy is to ensure registered nurses and midwives working for West Hampshire Clinical Commissioning Group, and their line managers, are aware of the CCGs approach to supporting their compliance with NMC Rev

Q2 Who will be affected by this policy, project or proposal?

This policy does not affect patients or the population of West Hampshire, but is relevant to staff employed by the CCG in one of the following capacities:

- A registered nurse employed by the CCG in a role requiring them to hold an active NMC professional registration
- A registered midwife employed by the CCG in a role requiring them to hold an active NMC professional registration
- An individual who holds line management responsibility for any individual with either of the roles above.

The policy will also be relevant to NMC registered nurses and midwives who may seek employment with the CCG. This is because their decision to apply for a job at the CCG may be positively influenced by the fact that we have this policy in place which demonstrates our organisational commitment to ongoing professional development and revalidation.

Evidence

Q3 What evidence have you considered?

Consider, for example, national drivers, local drivers, Public Health data, ONS data, and any pilots undertaken nationally or locally.

Sources of evidence:

- West Hampshire CCG Workforce Diversity Profile 2018/19
- NMCs guidance [Revalidation: How to revalidate with the NMC: Requirements for renewing your registration](#) (December 2015)

Age

The CCG Workforce Diversity Profile 2018/19 gives an indication of the age profile of employees (snap shot date 31 December 2018):

	2013	2014	2015	2016	2017	2018	Comparator
Total number of employees	190	197	204	229	275	322	
Age group							National CCG workforce
16-24	3.7%	2%	1.5%	1.7%	2.2%	4%	2%
25-44	28.9%	35.5%	35.3%	37.6%	40%	42%	43%
45-64	65.8%	60.4%	60.8%	59.4%	56.4%	53%	53%
65+	1.6%	2%	2.5%	1.3%	1.5%	1%	2%

- The age profile of the CCG workforce has been shifting year-on-year with a gradual increase in 25-44 year olds, and a decrease in staff aged 45-64 (although this older age group still make-up the majority the workforce).
- Employees aged less than 24 years and over 65 years, make-up a small proportion of the workforce at just 4% and 1% respectively.

The policy does not have a specific impact in relation to age of the staff referenced.

Disability (physical and mental)

The policy only applies to registrants with active registrations, who meet the Nursing & Midwifery Council's fitness to practice requirements for conduct and competence or health.

As set out in the NMCs guidance [Revalidation: How to revalidate with the NMC: Requirements for renewing your registration](#) (December 2015), nurses and midwives must provide a health and character declaration as part of the revalidation process. The guidance (page 24) notes that:

- 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

And goes on to state:

- 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 practice effectively with or without adjustments to support their practice.

Given this the CCG revalidation policy needs to include advice for managers about how to support registered nurses and midwives who are, or become, disabled so that any need for reasonable adjustments can be considered and met, thus enabling the employee to achieve revalidation. This process will need to be completed on an individual case by case basis given the unique way different health conditions and impairments impact on people.

The policy is available electronically or can be printed off and read in hard-copy paper format. Also the tools available from the NMC, on which this is based, are also available for registrants and their line managers to access electronically, download, or to save to their own computers. These different formats help many people with a need for accessible information to use software or other techniques to make the written information accessible to them.

The CCG holds some data about the level of disability amongst the workforce (see below), but we do not know whether any of the nurses or midwives employed by the CCG has a disability.

The CCG Workforce Diversity Profile 2018/19 gives an indication of disability amongst employees (snap shot date 31 December 2018):

	2013	2014	2015	2016	2017	2018	Comparator
Total number of employees	190	197	204	229	275	322	
Disability							National CCG workforce
No disability	-	31%	72.5%	76.4%	77.1%	78%	71%
Yes I have a disability	-	1%	2%	4%	3%	4%	3%
Prefer not to say	-	19.8%	21.1%	16.2%	10.9%	8%	0%
Undefined	-	48.2%	4.4%	3.9%	8.7%	10%	26%*

- The proportion of staff with a declared disability has gone up slightly since 2017 from 3% to 4%. This reflects the recruitment data where the relative likelihood of applicants with a disability being appointed from short listing is 1.64 times more likely than for non-disabled
- Also staff with a disability made up 3% of new starters in 2018, and 0% of leavers
- The proportion of declared disability in the CCG workforce remains low and does not reflect levels of disability in the local population (7%).

There may be a negative equality impact on employees subject to revalidation who also have an impairment, disability or health condition. This is because they may need additional time to complete professional development. To ensure this does not happen, we will build in an annual 'check point' via appraisal to support employees to be prepared for the three yearly processes. Also the requirement to revalidate every three years will reduce the risk of negative impact on the grounds of disability.

Dementia

As far as we know no employees have a diagnosis of dementia.

Gender reassignment (including transgender)

The policy does not have a specific impact in relation to gender of the staff referenced.

Marriage and civil partnership

None

Pregnancy and maternity

Consider and detail (including the source of any evidence) the impact on women during pregnancy and for up to 26 weeks after giving birth, including as a result of breastfeeding.

Potential for negative equality impact on grounds of pregnancy and maternity because employees who take full 12 month maternity leave may find it difficult to achieve the required working hours and professional development.

The evidence the NMC require for revalidation allows for maternity leave and requires registrants to produce evidence over a 3 year period. The working hours and continuing professional development required is averaged out over the three year period. This should militate against the potential for negative impact on nurses/ midwives who have a baby and take full maternity leave. New entitlements for shared leave with a partner will also reduce negative equality impact.

To ensure this is the case, we will build in an annual 'check point' via appraisal to support employees to be prepared for the three yearly processes.

Race

The CCG Workforce Diversity Profile 2018/19 gives an indication of the ethnic make-up of employees:

	2013	2014	2015	2016	2017	2018	Comparator
Total number of employees	190	197	204	229	275	322	
Ethnic background							Local population
White British	-	69.6%	80.9%	86.5%	84.7%	84%	93%
Any other White background	-	2%	3.5%	3.1%	3.3%	3%	3.1%

	2013	2014	2015	2016	2017	2018	Comparator
Total number of employees	190	197	204	229	275	322	
Ethnic background							Local population
Mixed ethnicity	-	0.5%	1%	1%	1%	2%	1.2%
Black, Asian and Minority Ethnic	-	2.5%	3%	3%	4%	5%	4.1%
Other specified	-	0%	0.5%	0.4%	1.8%	0%	0.2%
Undefined/ not stated	-	25.3%	11.3%	6.1%	4.7%	6%	0%

- The proportion of staff from 'White other' ethnic backgrounds reflects the ethnic diversity of local population. This includes staff from European backgrounds
- For the first time since 2013, this year the proportion of employees from 'Black, Asian and Minority Ethnic' and 'Mixed' ethnic backgrounds is higher than the ethnic diversity of the local population. Previously these groups were under-represented in the workforce.

The policy does not have a specific impact in relation to the race of the staff referenced.

Religion or belief

The CCG Workforce Diversity Profile 2018/19 shows there remain significant data gaps for the employee protected characteristic of religion or belief. This means we do not know the faith profile of the workforce.

	2013	2014	2015	2016	2017	2018
Religion or belief						
Atheism	-	5.1%	6.4%	7%	11.6%	14%
Christianity	-	15.2%	33.8%	37.6%	40.7%	41%
Other	-	0%	10.3%	12.6%	11.6%	13%
Prefer not to say	-	33.5%	48.5%	40.2%	30.9%	25%
Undefined	-	45.2%	1%	3%	5%	7%

The policy does not have a specific impact in relation to the religion or belief of the staff referenced.

Sex (gender)

The CCG Workforce Diversity Profile shows that on 31 December 2018:

- 79.5% of employees were female
- 20.5% were male.

The gender balance of the workforce has remained similar since 2013, at around 80% female and 20% male.

Working pattern by gender

	Working pattern	October 2013	Dec 2015	Dec 2016	Dec 2017	Dec 2018
Female	Full-time	50%	46.6%	47.6%	47.6%	48%
	Part-time	24.7%	31.4%	32.3%	32.0%	32%
Male	Full-time	11.1%	14.7%	12.2%	14.5%	14%
	Part-time	2.6%	7.4%	7.9%	5.8%	7%

Note: Part-time means working less than 30 hours a week.

The policy does not have a specific impact in relation to gender of the staff referenced.

Sexual orientation

The CCG Workforce Diversity Profile 2018/19 shows that significant data gaps remain for the employee protected characteristic of sexual orientation. This means we do not know the proportion of staff from different sexual orientations.

	2013	2014	2015	2016	2017	2018
Sexual orientation						
Gay, lesbian, bisexual, other	0%	0%	1%	1%	0.8%	1%
Heterosexual	0%	1%	45.1%	54.1%	62.2%	66%
Prefer not to say	47.4%	39.1%	52%	42%	32%	25%
Undefined	52.6%	59.9%	2%	3%	5.1%	8%

The policy does not have a specific impact in relation to the sexual orientation of the staff referenced.

Carers

We do not keep records about whether employees are unpaid carers for children, grandchildren, partners, parents, other relatives or friends who have a disability or long-term condition.

There is potential for nurses or midwives who work part-time because of caring responsibilities to be negatively impacted. The three yearly revalidation process will help reduce this potential negative impact.

Serving Armed Forces personnel, their families and veterans

We do not have data about whether staff are reservists, veterans or living with serving Armed Forces personnel.

The policy does not have a specific impact in relation to this.

Meeting psychological needs

Not considered as part of this policy.

Other identified groups

We do not have evidence about other groups within the workforce.

Involvement and consultation

Q4 How have you involved stakeholders with an interest in protected characteristics in gathering evidence or testing the evidence available?

As part of the consultation for this policy it was shared with nurses from the Safeguarding Children, Safeguarding Adults and Vulnerable Adults teams.

Q5 How have you involved stakeholders in testing the policy or programme proposals?

The overarching principles within this policy are those that have been tested by the Nursing & Midwifery Council (NMC) over more than a year, with national consultation and piloting of the principles within a variety of organisations across England who employ registered nurses and midwives.

The guidance captured within this policy reflects the national requirements designed and tested by the NMC, but localised to fit the CCG structures and resource.

Q6 For each involvement activity, please state who was involved, how and when they were engaged, and the key outputs:

Equality statement

Positive impacts

- Putting this policy in place to support nurses and midwives employed by the CCG to achieve successful revalidation will have a positive equality impact overall. It may attract prospective employees to apply for roles at West Hampshire CCG
- The policy will also help managers to better support employees to achieve revalidation
- The draft policy has been amended to include measures to reduce the potential negative equality impacts identified in this impact assessment. This includes providing guidance to managers who may support a nurse or midwife who has an impairment or disability and need to implement reasonable adjustments, and building in the annual 'check point' via appraisal to ensure issues for staff who have been on maternity leave or work part-time are addressed.

Negative impacts

Potential negative impacts identified for nurses and midwives employed by the CCG who:

- Have a health condition or disability
- Are on maternity leave
- Are a carer and work part-time.

We believe the actions identified, and amendments to the draft policy to reflect these, will ensure these potential negative impacts will not occur.

Health inequalities

None

Action planning for improvement, and to address health equalities and discrimination

Action	Person responsible	By date	Progress/ review (Add new actions if required)
1. Add guidance on responding to an employee's existing (or new diagnosis of) impairment or health condition to policy. This is to ensure reasonable adjustments are put in place so nurses or midwives with a disability have an equal opportunity to achieve revalidation	Deputy Director of Quality and Safety	Completed	
2. Add requirement for managers to complete a revalidation 'check point' during an employee's appraisal. This will provide opportunity to put measures in place to reduce potential negative impact for nurses or midwives who have been on full maternity leave or who work part-time.	Deputy Director of Quality and Safety	Completed	
3. Add requirement to review implementation of revalidation policy in terms of employees with disability, pregnancy and maternity and carers as part of normal policy review cycle. This will ensure managers are following the policy and potential negative equality impacts are avoided and equal opportunities advance for staff	Deputy Director of Quality and Safety	Completed	
4. Review policy including equality aspects	Deputy Director of Quality and Safety	Completed	

For your records

Person who carried out this assessment: Deputy Director of Quality & Nursing
(reviewed by Governance Manager)

Date assessment completed: 13 April 2016, reviewed and updated 18 September 2019

Date to review actions:

Responsible Director: Director of Quality & Nursing

Date assessment was approved: 20 April 2016