MANCHESTER UNIVERSITY NHS FOUNDATION TRUST

BOARD OF DIRECTORS (PUBLIC)

Report of:	Professor Cheryl Lenney, Group Chief Nurse
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Date of paper:	April 2018
Subject:	*Nursing and Midwifery Revalidation Annual Report 2017/18*
Purpose of Report:	Indicate which by ✓ • Information to note ✓ • Support • Resolution • Approval
Consideration of Risk against Key Priorities	**Staff and Patient Experience**
Recommendations	To note the actions taken and on-going plans in place to support nurses and midwives across the Trust to meet the Nursing & Midwifery Council statutory Revalidation requirement.
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BOARD OF DIRECTORS

1. Introduction

1.1 This is the first annual report for Manchester University NHS Foundation Trust (MFT) to provide assurance on Nursing and Midwifery Revalidation to the Board of Directors. Within the report, the data is reported separately from 1st April to 30th September 2017 to reflect the separate legacy Trusts that were in place prior to the establishment of MFT (University Hospital South Manchester – UHSM and Central Manchester University NHS Foundation Trust - CMFT). Data from 1st October 2017 to 31st March 2018 is presented for MFT.

2. Background

2.1 Since April 2016, nurses and midwives have been required to undergo a three yearly process of revalidation to demonstrate that their practice is in line with the Nursing and Midwifery Council (NMC) Code[1]. Revalidation replaced the previous post-registration education and practice (PREP) standards.

2.2 The requirements for revalidation are as follows:

- 450 practice hours, or 900 if renewing as both a nurse and midwife
- 35 hours of Continuing Professional Development including 20 hours of participatory learning
- Five pieces of practice-related feedback
- Five written reflective accounts
- A reflective discussion with an appropriate "Confirmer"
- Health and character declaration
- Professional indemnity arrangement
- Confirmation that the requirements have been met

2.3 Registrants are required to maintain a portfolio of evidence, which demonstrates they have met the requirements for revalidation.

2.4 It is the individual nurse or midwife's professional responsibility to ensure that they meet the revalidation standards. However, as a supportive employer, the Trust has a responsibility to support Registrants in meeting the requirements in order to demonstrate that practice is safe and effective.

3. NMC and Independent National Evaluation

3.1 In the interests of transparency and accountability, as part of the implementation of revalidation, the NMC committed to reporting quarterly and annually on revalidation. The second annual NMC report (Quarters 1 and 2 – April to September 2017) states that over 111, 671 nurses and midwives have successfully revalidated during the second year of implementation.

3.2 The NMC and employers identified a risk that the introduction of revalidation could lead to an increase in nurses and midwives leaving the register due to the additional work required to prepare for the revalidation process. In 2016, the NMC advised that following the implementation of revalidation there was no evidence of any increase in nurses and midwives leaving the register.

[1] NMC(2015) The Code Professional standards of practice and behaviour for nurses and midwives

3.3 The NMC also commissioned Ipsos MORI to conduct a wide ranging three year evaluation of revalidation. This process commenced in November 2016 and the Interim (Year 1) Report[2] identified a largely positive experience of revalidation, particularly around the process of reflection, and also the support provided by employers. The report also recommended that revalidation should not yet be seen as "business as usual", as two thirds of Registrants have yet to experience revalidation.

4. Implementation of Revalidation

4.1 Prior to the establishment of MFT, similar approaches were taken to implement revalidation in the former CMFT and UHSM, with one key difference relating to the management of staff that did not revalidate within the required timescale. This difference will be addressed by the MFT Nursing and Midwifery Revalidation Policy.

4.2 In both legacy trusts, the Chief Nurse held the overall responsibility for nursing and midwifery revalidation. In the former CMFT, implementation and on-going management was led by a Director of Nursing supported by the Head of Nursing (Professional Education and Development) and Divisional Heads of Nursing. Divisional revalidation champions were also established to provide local support within Divisions. A Revalidation Steering Group provided governance and leadership for the implementation of revalidation, and was supported by a Revalidation Champion Group. A number of resources, events and communication strategies were implemented to ensure the successful introduction of revalidation[3].

4.3 Within the former UHSM, the process of implementation and on-going management was led by the Deputy Chief Nurse, supported by the Corporate Lead Nurse and a part-time Project Manager. A Revalidation Steering Group, which included Heads of Nursing and representation from human resources, learning and development, workforce and finance, provided leadership of the implementation process. Practice Based Educators acted as revalidation champions and provided support for managers and individuals. A number of resources, events and communication strategies were implemented to ensure the successful introduction of revalidation.

5. Revalidation figures 1st April 2017 – 31st March 2018

5.1 Table 1, below, provides an overview of the number of Registered Nursing and Midwifery staff due to revalidate during the period 1st April 2017 to 31st March 2018. The data is presented separately up to 30th September 2017 to reflect the position of the legacy organisations and as MFT from 1st October 2017 to 31st March 2018. Analysis shows that in total 99.21% of Registrants who were due to revalidate in 2017/18 did so successfully.

[2] Ipsos Mori (2017) Independent evaluation of revalidation for Nurses and Midwives Interim report (Year One)

[3] CMFT N&M Revalidation Annual Report Appendix 1, April 2017

Table 1: Number of Nurses and Midwives due to revalidate and successful revalidations between 1st April 2017 and 31st March 2018.

1st April 2017 – 30th September 2017			
	CMFT	UHSM	MFT
Revalidations due:	825	470	X
Successful:	820 (99.40%)	465 (98.94%)	X
1st October 2017 – 31st March 2018			
	CMFT	UHSM	MFT
Revalidations due:	X	X	853
Successful:	X	X	846 (99.18%)

5.2 Between 1st April 2017 and 30th September 2017 five staff employed by the former CMFT did not revalidate. Of these, two Registrants retired, two changed their role and no longer required NMC registration. One Registrant had a planned lapse whilst they undertook a career break.

5.3 During the same time period, five staff employed by the former UHSM did not revalidate, however reasons for staff not revalidating were not collated.

5.4 For the period 1st October 2017 to 31st March 2018, seven staff did not revalidate. Of these staff one Registrant retired; two no longer required NMC registrations for their roles and one did not revalidate in accordance with NMC requirements resulting in termination of employment. The reasons that the remaining three staff, based in WTWA did not revalidate was not recorded, but a single approach to recording will be implemented across the Trust in 2018/19 to ensure detailed records are maintained and any themes can be identified and addressed.

6. 2018/19 Revalidation work programme

6.1 A significant factor in the successful implementation of Nursing and Midwifery Revalidation has been the integration of the requirement within everyday practice. To ensure continued success within MFT the following actions are in progress:

- Review existing policies and develop an MFT Nursing and Midwifery Revalidation Policy to align governance and processes across MFT. To include introduction of a standardised approach to reporting reasons for lapsed registrations.
- Review existing policies and develop an MFT Verification of Professional Staff Registration to align governance and processes across MFT.
- Align resources, support and advice available to staff.
- Align monitoring and data collection across all hospitals and Managed Clinical Services.

In order to maintain stability, existing policies and processes will remain in place until the new Nursing and Midwifery Revalidation policy is implemented.

7. Conclusion and Recommendation

7.1 Nursing and Midwifery Revalidation has been successfully implemented across MFT and the continued support of Registrants to ensure that they successfully revalidate remains a core patient safety objective for the Trust.

7.2 Data to record the reasons for not revalidating will be collated and reported Group wide from April 2018

7.3 The Board of Directors is asked to note the contents of this report.