

# REVALIDATION

## Completed templates and forms

# Contents

The forms and templates attached are examples of how a nurse or midwife may record how they meet the requirements of revalidation. Mandatory forms which must be used are marked below **(M)**.

These include real life examples taken from nurses or midwives who went through the revalidation pilot process. This pack includes a variety of reflective accounts designed to reflect multiple practice settings.

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# PRACTICE HOURS LOG TEMPLATE

## Guide to completing practice hours log

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

## Work settings

### Select appropriate setting:

- Ambulance service
- Care home sector
- Care inspectorate
- Cosmetic/aesthetic sector
- District nursing
- Education
- Governing body or leadership role
- GP practice or other primary care
- Health visiting
- Hospital or other secondary care
- Insurance/legal
- Military
- Occupational health
- Other community services
- Overseas
- Policy
- Prison
- Private domestic setting
- Private health care
- Public health
- Research
- School
- Specialist (tertiary) care
- Telephone or e-health advice
- Trade union or professional body
- Voluntary sector
- Other

## Your scope of practice:

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

## Registration:

- Nurse
- Midwife
- Nurse/SCPHN
- Midwife/SCPHN

Dates:	Name and address of organisation:	Your work setting <small>(choose from list above):</small>	Your scope of practice <small>(choose from list above):</small>	Number of hours:	Your registration <small>(choose from list above):</small>	Brief description of your work:
1.1.15 – current		Independent healthcare provider	Management Policy	FT 37.5 pw = approx 1725.per annum	Nurse	Group Director of Nursing <ul style="list-style-type: none"> <li>• The development of nursing practice through competency programmes.</li> <li>• Identify and implement appropriate CPD training for nurses to develop their skills.</li> <li>• Develop a corporate Nursing strategy.</li> <li>• Implementation of the 7Cs across the Group.</li> </ul>

# PRACTICE HOURS LOG TEMPLATE

						<ul style="list-style-type: none"> <li>Implementation and management of nurse re-validation.</li> <li>Implementation of an improved clinical supervision programme for nurses.</li> </ul>
1.7.96 – current		District nursing	Direct patient care	FT 37.5 pw 1725.per annum	Nurse	<ul style="list-style-type: none"> <li>Community nursing</li> </ul>
1.04.11-31.12.14		Independent healthcare provider	Management Policy Education	FT 37.5 pw = approx 1725.per annum	NURSE	<p>Service Line Operations Director</p> <ul style="list-style-type: none"> <li>To ensure consistency of safe nursing practice through effective Governance, Safeguarding, Risk Management (clinical and environmental), Audit and adapting service delivery to published NICE guidelines, DoH statutory notices and changes in legislation.</li> <li>To ensure service users have a positive experience of care by involving them fully in all aspects of service provision.</li> </ul>

(Please add rows as necessary)

# CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

## LOG TEMPLATE

Please provide the following information for each learning activity, until you reach 35 hours of CPD (of which 20 hours must be participatory). For examples of the types of CPD activities you could undertake, and the types of evidence you could retain, please refer to Guidance sheet 3 in *How to revalidate with the NMC*.

### Guide to completing CPD record log

#### Examples of learning method

- Online learning
- Course attendance
- Independent learning

#### What was the topic?

Please give a brief outline of the key points of the learning activity, how it is linked to your scope of practice, what you learnt, and how you have applied what you learnt to your practice.

#### Link to Code

Please identify the part or parts of the Code relevant to the CPD.

- Prioritise people
- Practise effectively
- Preserve safety
- Promote professionalism and trust

Dates:	Method Please describe the methods you used for the activity:	Topic(s):	Link to Code:	Number of hours:	Number of participatory hours:
27.1.15	Safe Staffing / Nursing Skill Mix conference  Course attendance	Safe Staffing, Nursing Skill Mix. Looked at tools and concepts for setting safe staffing levels. Though mainly general adult acute, concepts translate to mental health. Generated a presentation on key points and delivered to the Corporate Assurance Committee (evidence in online folder) Main learning – actual versus planned staffing is irrelevant unless the planned is correct and includes acuity and dependence not just number of service users	Preserve safety Promote professionalism and trust	6	3

# CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

## LOG TEMPLATE

21.1.15	Corporate Leadership Conference Conference attendance	Leadership across the organisation, people development, strategic direction, developments, including 1 hour lecture from psychologist	Prioritise people Preserve safety	7	2
4.2.15	Developing Leadership and Facilitation Capacity of the Nursing Workforce Conference and workshop attendance	Covered number of regional guest speakers & afternoon 2x workshops looking at innovative practices in the region related to developing leaders on the frontline.	Prioritise people Practise effectively Preserve safety Promote professionalism and trust	6	3
19.2.15	Corporate Healthcare Conference Conference attendance	1 hour presentation on people skills	Prioritise people	1	0
4.3.15	Department of Health Independent Advisory Forum Workshop attendance	Shape of the DoH and impact on independent sector Presentation on Revalidation	Prioritise people Practise effectively Preserve safety Promote professionalism and trust	2	2
15.1.14	Police Training and Conference Centre Course attendance	Review on multi agency working, cross county boundaries, individual and organisational responsibility and accountability, communication.	Prioritise people Practise effectively Preserve safety	2	2

# CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

## LOG TEMPLATE

			Promote professionalism and trust		
3.6.14	meeting with CQC Meeting attendance	Presentation by CQC on new ways of regulating and inspecting. Group breakouts with CQC to tackle specific issues, problem solve and areas specific to CQC	Prioritise people Practise effectively Preserve safety Promote professional ism and trust	3	3
8.7.14	Managing risk in mental health units in relation to building design Conference attendance	Focused upon the nature of incidents in mental health units, where they occur and why. Insights into the type of work we can do to reduce risk and where work can and should be done to reduce risk of harm.	Preserve safety	1	0
16.9.14	Dashboard Pilot Training Course attendance	Using key metrics around quality to better assess and support delivery of quality services at a divisional, regional and site level. Enables triangulation.	Preserve safety	3	3

# CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

## LOG TEMPLATE

<p>30.10.1 4</p>	<p>NHS Benchmarking - Learning Disabilities conference - Key findings and good practice event</p> <p>Course attendance</p>	<p>Introduction to the network and to learning disabilities</p> <p>Benchmarking Projects</p> <p>Strategic direction: Transforming care – home not hospitals</p> <p>Using information to drive quality inpatient Care</p> <p>Results of the learning disability NHS Benchmarking Project</p> <p>Discussion of Key findings and good practice</p> <p>Leadership in learning disability nursing Using information to improve the health of people with learning disabilities</p>	<p>Practise effectively Promote professionalism and trust</p>	<p>2</p>	<p>0</p>
<p>13.11.1 4</p>	<p>Nurse Revalidation Workshop</p> <p>Workshop attendance</p>	<p>Understanding baseline processes across the organisation and divisional differences. Agreeing to participate in pilot with NMC</p>	<p>Prioritise people Practise effectively Preserve safety Promote professionalism and trust</p>	<p>2</p>	<p>2</p>
<p>14.4.15</p>	<p>Regional Directors of Nursing Conference</p>	<p>The theme was 'Inclusion'. The Workforce Race Equality Standard</p>	<p>Prioritise people Practise</p>	<p>6</p>	<p>6</p>



# CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

## LOG TEMPLATE

	Conference attendance	(WRES) has been included in the contract for 2015/16 & the author was one of the speakers on the day. Also update on the latest nursing policy issues including amongst a number of other topics including Revalidation and Transforming Care.	effectively Preserve safety Promote professional ism and trust		
				<b>Total: 41</b>	<b>Total: 26</b>

SAMPLE

# FEEDBACK LOG TEMPLATE

## Guide to completing feedback log

### Examples of sources of feedback

- Patients or service users
- Colleagues – nurses midwives, other healthcare professionals
- Students
- Annual appraisal
- Team performance reports
- Serious event reviews

### Examples of types of feedback

- Verbal
- Letter or card
- Survey
- Report

Please provide the following information for each of your five pieces of feedback. You should not record any information that might identify an individual, whether that individual is alive or deceased. Guidance Sheet 1 in *How to revalidate with the NMC* provides guidance on how to make sure that your notes do not contain any information that might identify an individual.

You might want to think about how your feedback relates to the Code, and how it could be used in your reflective accounts.

Date	Source of feedback Where did this feedback come from?	Type of feedback How was the feedback received?	Content of feedback What was the feedback about and how has it influenced your practice?
1/7/2015	Student	Verbal, in a meeting to review her placement documentation	She found it valuable when I let her take the lead in a postnatal baby check. I will encourage my students to take the lead more often and try to only provide direction when they need it. Linked to 'promote professionalism and trust' in the Code.
10/8/2015	Woman I looked after on PN ward	Thank you letter	Thanking me for supporting her and her partner throughout the discharge process. Highlighted the importance of taking time to make sure women feel confident and comfortable before they are sent home.

# REFLECTIVE ACCOUNTS FORM

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

## Reflective account: Independent Healthcare Provider – Senior Nurse Manager

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

Safe Staffing, Nursing Skill Mix 2015. Looked at tools and concepts for setting safe staffing levels. Though mainly general adult acute concepts translate to mental health. Series of presentations as well as group discussion Q & A .

Main learning – actual versus planned staffing is irrelevant unless the plan is correct and includes acuity and dependence, not just number of service users. How do we apply to multiple/diverse service being delivered in environments that are not purpose built?

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

How safe staffing happens which is

- Establishment setting / staffing review
- Systematic, consistent approach
- Triangulate
- Reviewed regularly
- Follow best practice guidelines with staff input
- Policy and procedure on rostering
- Judgement as well as training
- If you don't know what you've got, you can't use it

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

Developed an action plan as follows

- Rota management - E Rostering
- Review of staffing establishment by ward from safe perspective
- Annually and on any change in service or configuration
- Ward manager training
- Define organisational red flags / threshold
- Tools & technology
- Escalation process
- Review process
- Asked Board Sign off

# REFLECTIVE ACCOUNTS FORM

## How is this relevant to the Code?

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

Promote professionalism and trust

SAMPLE

# REFLECTIVE ACCOUNTS FORM

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

## Reflective account: Independent Healthcare Provider – Senior Nurse Manager

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

CPD on 30.7.14. Systematic Investigation training.

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

I had not previously undertaken any investigation training and over time have been investigating increasingly serious and complex situations involving both staff and service users.

I developed a greater understanding of the systematic investigative process and its practical application to investigate a wide range of incidents, including patient-safety breaches, complaints, non-clinical events and professional misconduct or capability concerns. Also to understand how an investigation can be used to discover why an incident occurred and identify solutions to prevent similar incidents happening again.

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

Shortly after completing the training I had to lead an investigation panel into the suicide of a service user within 48 hours of discharge. I was able to use the new skills and tools to better organise the information available. This was particularly beneficial in organising the chronology. I was able to put into practice interviewing skills with the nursing staff who stated they could not recall the service user. As a consequence the investigation and subsequent report felt more competent and detailed than previous investigations and the recommendations were more comprehensive. I had increased confidence in leading the panel. Below are the aspects of the training that I was able to practically apply to my work :-

- human error theory
- commissioning and setting terms of reference
- securing and collating written evidence
- investigative tools and models
- establishing a comprehensive chronology
- analysing data
- Writing the report and developing recommendations that are specific, measurable, achievable, relevant and timescaled (SMART).

# REFLECTIVE ACCOUNTS FORM

## How is this relevant to the Code?

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

- Practice effectively
- Preserve safety
- Promote professionalism and trust

SAMPLE

# REFLECTIVE ACCOUNTS FORM

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

## Reflective account: Secondary Care – NHS hospital nurse

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

CPD participatory activity – Attending a Manual Handler Transfer Specialist course.

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

As an experienced community nurse I have had to adapt to various environments to deliver care safely and effectively. Working within the community team we are involved in providing care for patients with complex health care needs at home, most presenting with limited ability to mobilise and transfer independently. I was approached by the lead ANP to participate in the manual handling transfer specialist training course to help develop the team's knowledge and skills in patient handling safely and effectively. The role of transfer specialist will also promote the team's compliance with the Trusts mandatory training programme.

The startling statistics highlighting that 24% of NHS staff are injured through poor manual handling practice and contributes to 40% of sickness and absence emphasises the need for raising awareness of the consequences of poor practice. The cost to the NHS for compensation claims is approximately 150million a year, money that should go directly to patient care.

The role of transfer specialist will focus on organisational and individual training needs to continue to move safer handling practice forward across the organisation in line with current best practice. Each trainer will be expected to attend a minimum of one update training session every year facilitated by a board manual handling advisor.

Standards for training staff entail completing a structured manual handling passport and the assessment of staff members involves carrying out practical modules relevant to their workplace. For new staff an induction will be carried out and a checklist of training needs must be met prior to commencement of work. Self-assessments will be carried out every 2 years and training if required provided by the transfer specialist.

# REFLECTIVE ACCOUNTS FORM

The various legislation regarding risk assessments and safety at work were discussed and the importance of assessment prior to performing any task was reinforced, with the aim to reduce risk of injury to both patient and staff member

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

Along with another team member we have arranged a teaching programme which includes individual task assessments, control measures, risk assessments, care plans that are suitable and review dates. We have offered support in accompanying colleagues on home visits to carry out complex assessments which enables us to initiate safer handling principles. We will act as a resource to the team in relation to the ordering of equipment with the purpose of reducing the risk of injury to colleagues and patients as a result of poor manual handling practice

## How is this relevant to the Code?

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

All 4 themes of the NMC Code are linked to this CPD activity:

Prioritise people - the majority of people referred to the CRT are older with chronic limitations including social needs. In order for some patients to remain at home safely functional assessments are necessary to perform the fundamentals of care safely. The extended knowledge and skills in identifying appropriate aids such as hoists for transferring patients enables those individuals to have a choice to remain independent with formal support at home.

Practise effectively – the ongoing manual handling updates enables staff members to maintain their knowledge and skills needed for safe and effective practice.

Preserve safety – As a transfer specialist I am to be a resource for the team, supporting colleagues to take account of their own personal safety as well as patient safety by attending manual handling training sessions.

Promote professionalism and trust - I intend to be a model of integrity and leadership by being committed to the standards of safer handling practice.



# REFLECTIVE ACCOUNTS FORM

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

**Reflective account:** Occupational health nurse

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

*Annual appraisal discussion with my line manager – health & safety manager. I rated each of my objectives and my line manager agreed on the rating and suggested an upgrade to one of the objectives on ‘healthy company’. The most constructive feedback was how to manage my head of department who does like to get involved with lots of initiatives and then needs me to provide information, advice and support on top of day job.*

*The organisation has an online performance management system that is completed by the employee, reviewed by the manager and allows for comments on performance as part of end of year discussion.*

*The discussion lasted about 45 minutes and we ran through each of the objectives, what has been achieved and how it was achieved. We then reviewed my competencies against the Competency Framework, reflecting on current and required level. Any gaps would then form part of ongoing development. We also discussed the development plan and agree learning needs.*

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

*I have a lot of work to do and need to close out the systems work I have been doing to start concentrating more time on the three key projects that have been identified for occupational health of the next 2-3 years*

*Finally I have learnt how to more effectively manage the expectations of our Head of Department, in terms of my time and ability to deliver on the priorities. He does take push back well and usually allows me to make the final decision ie mental health providers, implementing health assessment standards and working with the alcohol network.*

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

*I developed my skills in the area of audit; air quality and fatigue through the attendance at courses, conferences and self-directed learning.*

# REFLECTIVE ACCOUNTS FORM

- *Audit – ISO 9001 Lead Auditor course. Part of internal audit team – developed tools and new style of delivery*
- *Air quality – conducted research, reviewed external technical research project, lead working group developing good practice guide*
- *Fatigue – conducted research, lead small-scale research project and provided feedback and advice.*

## How is this relevant to the Code?

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

*The related to all four themes;*

1. *Prioritise people – I put great credence on the personal development programme as it provides formal feedback and helps me understand needs and try to deliver.*
2. *Practise effectively – provides an opportunity to identify areas for improvement and development activities*
3. *Preserve safety – able to discuss gaps in knowledge and seek advice and support on filling those gaps*
4. *Promote professionalism – conducting myself professionally in the reflective discussion, choosing my words appropriately and linking my work objectives with those of my profession.*


# REFLECTIVE DISCUSSION FORM

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

## To be completed by the nurse or midwife:

Name:	A. Nurse
NMC Pin:	12A3456S

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

Name:	L. Manager
NMC Pin:	06B4567E
Email address:	l.manager@nurse.com
Professional address including postcode:	London Hospital Jones Road London LN1 2NM
Contact number:	020 1234 5678
Date of discussion:	30/01/2016
Short summary of discussion:	We discussed all five of Amy's reflective accounts and linked them back to the Code. We had a very beneficial discussion about some of the issues raised, and shared our different perspectives. We also identified some professional development objectives for Amy, and she is now going to write an action plan for the future.
<p>I have discussed five written reflective accounts with the named nurse or midwife as part of a reflective discussion.</p> <p>I agree to be contacted by the NMC to provide further information if necessary for verification purposes.</p>	Signature: 
	Date: 30/1/2016

# CONFIRMATION FORM

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

## To be completed by the nurse or midwife:

Name:	A. Nurse
NMC Pin:	12A34565
Date of last renewal of registration or joined the register:	30/4/2013

## I have received confirmation from (select applicable):

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

## To be completed by the confirmer:

Name:	L. MANAGER
Job title:	POLICY DIRECTOR
Email address:	L.MANAGER@NURSE.COM
Professional address including postcode:	LONDON HOSPITAL JONES ROAD LONDON LN1 2NM
Contact number:	020 1234 5678.
Date of confirmation discussion:	30/01/2016.

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

NMC Pin: 0634567E

If you are a regulated healthcare professional please provide:

Profession:

Registration number for regulatory body:

If you are an overseas regulated healthcare professional please provide:

Country:

Profession:

Registration number for regulatory body:

If you are another professional please provide:

Profession:

Registration number for regulatory body (if relevant):

## Confirmation checklist of revalidation requirements

### Practice hours



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

### Continuing professional development



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



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



You have seen accurate records of the CPD undertaken.

## Practice-related feedback



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

## Written reflective accounts



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

## Reflective discussion



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

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

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

Signature:

*J. Manager*

Date: 30/01/2016.