Who should read this guidance sheet?

This guidance sheet sets out the practice hours revalidation requirement for people on our register with multiple registrations. It explains why the revalidation requirements don’t change for nurses with more than one field of practice, SCPHNs or people with additional qualifications. It also discusses when you should, and should not, maintain your registration(s) with the NMC.

Multiple registrations

Each person registered with the NMC is a nurse, midwife or nursing associate, but some people have more than one registration. We refer to those who have two registrations, most commonly as a nurse and midwife, as dual registrants. It is also possible to have three registrations as a nurse, midwife and nursing associate; we refer to these people as triple registrants.

Practice hours revalidation requirement for people with multiple registrations

In order to revalidate everyone on our register must demonstrate that they have undertaken a minimum number of practice hours relevant to their scope of practice. In order to meet the practice hours requirement to maintain their registrations, people with multiple registrations must have undertaken a minimum of 450 hours for each registration over the three year period since their registration was last renewed or they joined the register. This means that dual registrants must have undertaken at least 900 practice hours, and triple registrants must have undertaken at least 1,350 practice hours. Everyone must provide us with evidence to show that they have met the practice hours requirement for each registration.

The other revalidation requirements are the same for people with multiple registrations as for people who only have one registration. For example, people with multiple registrations will only have to obtain a total of five pieces of practice-related feedback and write five reflective accounts. However, they should think about how they might meet all of the requirements of revalidation across all of their roles. For example, they may choose to write three reflective accounts relating to their midwifery practice, and two reflective accounts relating to their nursing.

We have put together some case studies that we hope will help you.
Example A: a dual registrant practising in two different roles

You have been practising as a dual registrant in two different roles – one in nursing and one in midwifery – since your last renewal, either at the same time or at different times during that period. For example, you practised as a midwife on a labour ward and also worked as a nurse in a hospice. You must undertake a minimum of 450 hours of practice in each of your nursing and midwifery roles (900 in total). You should record each role separately, with separate practice hours and evidence for each.

Example B: a dual registrant practising in one role

If you have practised as a dual registrant in just one role since your last renewal you will need to use your professional judgment to decide whether you are relying on both your registrations in that role, or if you are only relying on one of your registrations. This will not depend on the title of your role, but on the actual practice you are doing. For example, you might be working as a Family Nurse in a Family Nurse Partnership, but relying on both your nursing and midwifery registrations within your scope of practice.

Some dual registrants will be working in a role where they cannot demonstrate that they are relying on both registrations.

• You are registered as both a nurse and a midwife and have been working solely as a general practice nurse for the last three years. When you complete your revalidation application you should specify nursing as your scope of practice. You cannot select any individual tasks undertaken as part of your practice as a practice nurse (for example, record-keeping or examining women) in order to maintain your midwifery registration.

Some dual registrants will be working in a role where they can demonstrate they are relying on both registrations.

• You are working as a midwife in a tertiary hospital and is using your nursing skills regularly, in addition to relying on your midwifery skills. If you are able to demonstrate you are relying on both your nursing and midwifery knowledge, skills and experience in this role, then you can renew both registrations. You will still need to declare a minimum of 900 hours – at least 450 hours for nursing and at least 450 hours for midwifery – and you cannot double-count these hours.

As a regulator, we regulate the three separate professions of nurse, midwife and nursing associate, not duties or tasks. If you have decided to practise in one role where you are solely relying on your skills, knowledge and experience as a nurse, midwife or nursing associate, it is not necessary for you to maintain multiple registrations. Ultimately, it is for people on our register to determine whether they are working in a role where they rely on their skills, knowledge and experience as a registered nurse, midwife or nursing associate.

We recognise it is more likely that a dual registrant working as a midwife will be able to demonstrate they are relying on both midwife and nurse registrations than a dual registrant who is working as a nurse. You will need to use your own professional judgment to ensure your registration with the NMC properly reflects your current scope of practice.

Nursing fields of practice

Nurses will also have a field of practice on our register: adult, children's, learning disability and mental health. When they first register with the NMC they will be registered in at least one field, depending on their qualification, and over their career they may move fields and practise in a different field to their initial registration through training and experience.
Regardless of how many fields they are registered in, people who have only one registration as a nurse do not need to complete any additional requirements for their revalidation application. However, their application should relate to their most current or most recent scope(s) of practice. For example, they might have initially trained as an adult nurse and now be working in children's nursing, so their application will relate to their current scope of practice as a children's nurse.

**SCPHNs and other additional qualifications**

Registered nurses and midwives can complete a post-registration qualification which leads to an additional entry in the part of the register for Specialist Community Public Health Nursing (SCPHN). SCPHNs must maintain their registration as a nurse or a midwife and cannot renew their registration only as a SCPHN. Registered nurses and midwives can also gain additional qualifications such as a Specialist Practice Qualification (SPQ) or a prescribing qualification which are recorded on our register.

SCPHNs and people on our register with additional recorded qualifications do not need to complete any additional requirements for their revalidation application. Their revalidation application should relate to their most current or most recent scope(s) of practice. For example, if a nurse practises solely in a SCPHN role, their revalidation application will relate to their scope of practice as a SCPHN.

Dual registrants who are both a nurse and midwife who are working solely in a SCPHN role and only relying on one of their registrations may choose to lapse one registration only – as long as they maintain their other registration. For example, if they are not relying on your midwifery practice, then they may choose to lapse their midwifery registration provided they maintain their nursing registration. If they want to practise using their lapsed registration in the future, they can undertake a return to practice programme and seek readmission to that part of the register.

**Other scenarios**

**A nurse who is undertaking a shortened midwifery programme**

Registered nurses can undertake a shortened midwifery programme to become a midwife. There is no NMC requirement for them to maintain their registration as a nurse during the period that they are on the programme. They should therefore be regarded as a student midwife, not a registered nurse during their practice placements. (There may be a requirement from the course provider that students maintain their registration with the NMC for the duration of the course; this is something they will need to check with their course provider.)

They can revalidate their nursing registration whilst undertaking the midwifery programme as long as they can meet all the requirements for revalidation in a nursing role. They will be able to use any practice hours undertaken as a nurse, either before or after their midwifery course, during the three year period. They will not be able to use their midwifery training hours to maintain their registration as a nurse. If they complete their midwifery course before they revalidate, they will not need to meet the practice hours requirements for their new registration as a midwife until the end of their next revalidation cycle.

If a student midwife cannot meet the requirements to revalidate their nursing registration (for instance because they have not practised as a nurse in the last three years) they will need to let their nursing registration lapse. They will have to apply for new registration as a midwife when they have completed their pre-registration midwifery course. They will then revalidate as a midwife for the first time, three years after the date on which they join the midwifery part of the register. If they wish to re-join the nursing part of the register, they will need to meet the readmission requirements.
A nurse who is also registered as a medical doctor

A nurse who is also registered as medical doctor (or another professional in a separate regulated profession) cannot rely on practice hours that use their skills, knowledge and experience as a medical doctor to revalidate as a nurse.

We recognise there may be some skills and knowledge common to both regulated professions; however, they are different regulated professions. For example, the approach to the overall management and supervision of patients would be different and an individual would be required to approach their work based on different professional codes and professional responsibilities, obligations and accountabilities relevant to that regulated profession.

Sub-part 2 nurse registration

Following changes to our legislation, we are no longer accepting applications to join sub-part 2 of the nursing register. The Government consulted on this change, and these changes came into effect on 12 July 2018.

Some nurses will have entries on sub-part 2 of the register, and some will have entries on both sub-part 1 and sub-part 2. We do not make any distinction between these sub-parts of the nursing register for the purpose of revalidation. A person on sub-part 2 of the register will need to meet the full requirements of revalidation in the same way as a first level nurse, midwife or nursing associate in order to maintain their registration. This includes undertaking at least 450 hours of nursing practice and meeting the requirements in their current scope of practice.