

September 2024

Understanding disabled professionals' revalidation

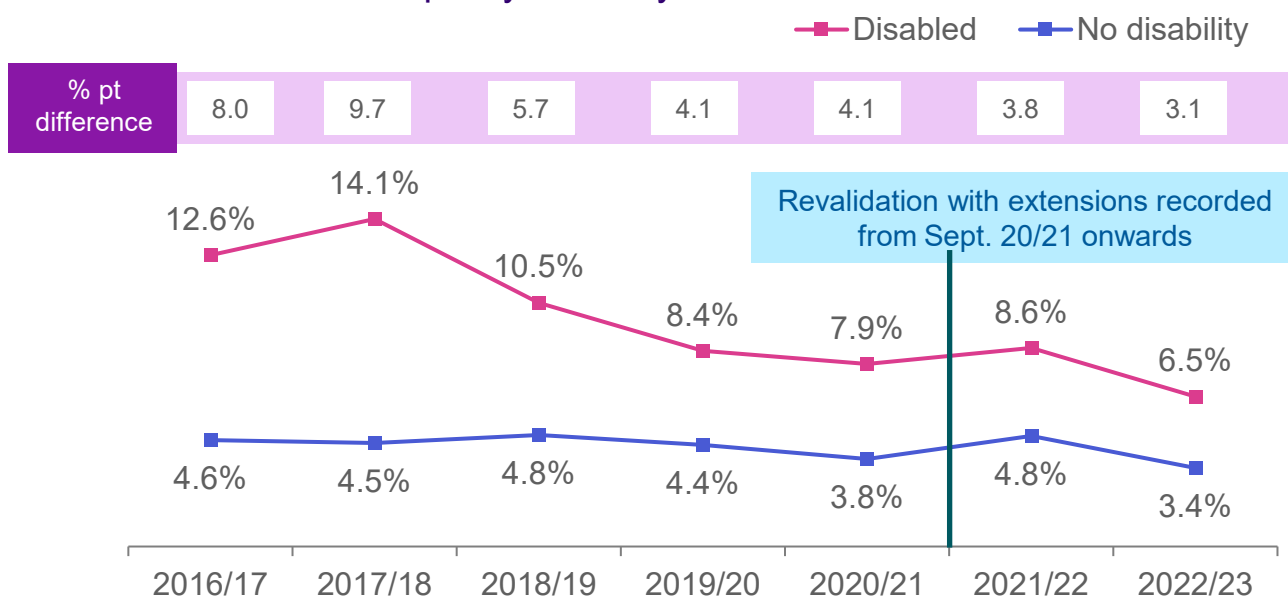
Final report



Disabled professional revalidation is increasing – yet still significantly lower than non-disabled

% of eligible professionals not revalidating each year

NMC annual data – split by disability



October 2020

Ambitious for Change found that disabled professionals are less likely to revalidate than non-disabled professionals

Today

Despite follow up work, we still did not know enough about *why* disabled professionals are less likely to revalidate.

Following findings from Ambitious for change, new research was to explore:



What does our data tell us about why disabled people are less likely to revalidate?



Are there particular revalidation requirements that are challenging for disabled professionals to meet?



How far do their challenges relate to our processes, to working conditions, or to other factors (e.g. job role, work setting, other protected characteristics)



What potential changes can we identify that could ensure our revalidation requirements are as equitable as possible for disabled professionals?

We looked at our own data, and heard from disabled professionals about their experience



We analysed our data on revalidation and leavers 2016-2022

We spoke to people:

On the register and those who had left
From all four countries
Of different ages
With a range of disabilities and impairments



We spoke to a total of 29 professionals:
Conducting 18 depth interviews and held two 90 minute discussion groups

More details on who we spoke to are in the appendix.

We worked with external colleagues to help make the project as accessible as possible



RCN and disability coalition reps were integral to the working group.



They supported recruitment, analysis and sharing findings.



A one-minute video (with closed captions) introduced the project.



Participants could take part in different ways.

More detail about recruitment is in the appendix.

Executive Summary

The most challenging requirements:



Practice hours

CPD



Reflective discussions and
Confirmation.

Many professionals we spoke to were unclear about:



When they should declare their disability and what would happen if they did.



Who is eligible to confirm their revalidation.

Employers were seen as crucial to the success of revalidation.

They could be a support or a barrier.

Disabled professionals are less likely to have employer support, due to:

Discrimination



Moving to more flexible employment, such as agency or Bank work.

Disability and neurodiversity bring challenges to life & work which also affect revalidation.

Executive Summary: How do we ensure equity? Professionals' suggestions

Clear & consistent communication

- Consistent information (website & phone)
- Clear definitions of 'good health'
- Support for specific challenges
- Reminder emails throughout revalidation cycle

Flexible and fair requirements

- Multiple paths to fulfil requirements
- Include unpaid work in practice hours
- Pro-rata requirement for hours
- Restrictions on practice for partial revalidation

Supportive & proactive engagement

- Proactive support when employers block revalidation
- Support for employers to prioritise confirmation
- A dedicated app to log (and submit) requirements
- Reach out to those leaving to offer support to stay

Section 1

**Illness, impairment and
workplace discrimination
can make revalidation
requirements more difficult
to meet and to record.**

Professionals have eight requirements to meet when revalidating



450 practice hours
(900 for dual registration)



Five pieces of practice-related feedback



Reflective discussion



Professional indemnity arrangement



35 hours of CPD incl. 20 participatory hours



Five written reflective accounts



Health and character declaration



Confirmation

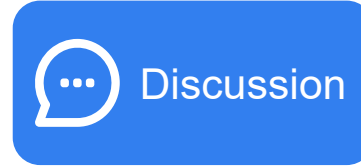
Four revalidation criteria were notably challenging for disabled professionals



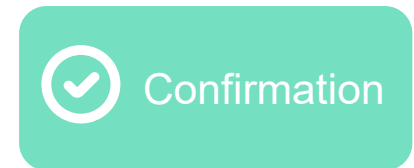
**Impact of long
term sick leave**



**Unavailable or
not accessible**



**Dependent on
employers**



**Dependent on
employers**

- Our **previous work** showed that other professionals also find these requirements challenging.
- Disabled professionals are **more likely to face discrimination at work** than those without disabilities.
- These experiences can **make revalidation more difficult** for those with disabilities.

“

I listened to other people talking about it in the office: “oh, it's easy”. And I'm thinking, how is this easy? I guess there is a difference for us, yes, there's not one part that felt smooth.”

Adult Nurse, age 31-40, Female, on the register

Long-term sick leave can make it difficult for some to accrue the required practice hours



Illness and impairment forced many of the people we spoke to to **reduce their working hours or go on long term sick leave**; in some cases for years.



This made it difficult for them to accrue the required hours.



Some professionals **felt under pressure** to go back to work to attempt to get required hours, which had a negative impact on their health.



A lot of people with disabilities tend to reduce their hours to cope. I think the 450 hours should be pro-rata.

(Adult Nurse, 56-60, Female, not on register)



I thought I would do a bit of bank work, but the Trust made it so difficult that it never actually happened. I didn't have enough clinical hours.

(Adult Nurse, 56-60, Female, not on register)

Accessing CPD can be a challenge due to poor health, reduced mobility or vulnerability



CPD may not be available

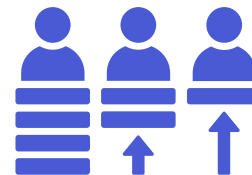
Disabled professionals **cannot travel as easily as others.**

Not everyone had accessible, local, high quality, CPD.



CPD may not be accessible

Impairments like physical mobility, poor mental health, hearing loss, or lack of reasonable adjustments can make participation difficult, including online.



“ I said, 'Are you making any accessible adaptations? Are you videoing it? Can I join via Teams with somebody sat there with a laptop so that I can see what's going on? 'No, we're not.' I cannot do it.

(Primary Care Nurse, Age 56-60, Female, on the register)

A lack of support from employers can further hinder ability to achieve CPD requirements



CPD isn't available
whilst off sick



CPD can be restricted
by unsupportive or
discriminatory managers



Services may limit
CPD in a staffing
crisis.



Because I was off sick, I couldn't be seen to be doing my training at work.

*(Adult Nurse, age 31-40,
Female, not on register)*



They'd basically throttled my training opportunities and told me they won't get their money's worth.

*(Midwife, age 51-55,
Female, not on register)*



CPD is a big difficulty, especially nowadays, because they can't get the staff on the wards.

*(Adult Nurse, age 56-60,
Female, not on register)*

Reflective discussion and confirmations can be hard if employer relationships are strained



Long term sickness or unemployment meant some had **no access to employer support.**



Higher rates of harassment and bullying for disabled professionals may mean **poor relationships with potential confirmers.**



Those who had the option to use friends or contacts to confirm were advantaged over those who didn't.



Misinformation or uncertainty about who can confirm revalidation makes this harder for some

“



I read in the small print I wasn't allowed to use a friend.

(Adult Nurse, age 21-30, Female, not on the register)



“



I sat with my bezzie friend. [...] She told me off because mine wasn't good enough and she kept quizzing me, but we still did it in an afternoon.

(Adult Nurse, age 60-65, Female, not on the register)

The people we spoke to found other criteria less difficult, but could benefit from support



Health and character
declaration

**Fear of
disclosure**



Feedback

**Impact of long
term sick leave**



Reflective
accounts

**Challenges
with writing**



Professional
indemnity

**Dependent on
employment**

Professionals are unclear about declaring health conditions and what happens if they do



Those we spoke to were unclear what 'counts' as a health condition



Some did not declare ill-health because they could do their current job, with reasonable adjustments



Others did not declare if they felt they could do *any* kind of nursing work



It is unclear to some what happens if they declare ill-health



Some worried that the NMC might tell their employer, or that their fitness to practise might be questioned



At that point I felt that I could still say I was of sound mind and body; at least well enough to work how I was working.

*(Children's Nurse, age 51-55,
Female, on the register)*

Feedback, reflective accounts and professional indemnity insurance were less of a concern

However, they were still a challenge for some:



A small number of professionals found it difficult to ask for feedback during Covid or staffing crisis.



Neurodiversity could cause difficulties with writing and preparation for revalidation.



All the people we spoke to had indemnity insurance provided by their employer.



I didn't imagine that I was not gonna be at work for the next two years; that I wouldn't be able to get [feedback] elsewhere.

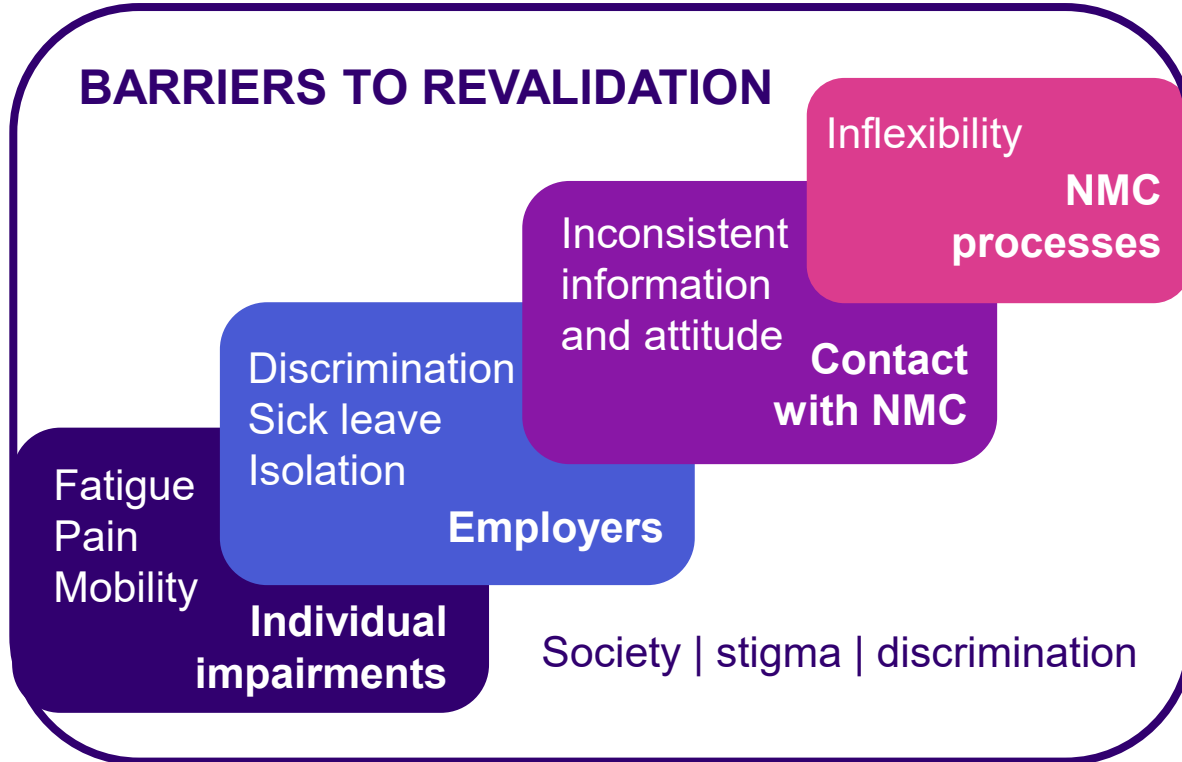
(Adult Nurse, age 41-50, Female, not on the register)

Section 2

The extra challenges of living with a disability, including discrimination inside and outside the workplace, affected revalidation too.

Stigma and discrimination in the wider world impact on experiences in the workplace

BARRIERS TO REVALIDATION



Everyday challenges for disabled professionals come from many different places.

In the same way, barriers to revalidation can stem from individual impairments, workplaces, the NMC and wider society.

“ You don't always have time to do that when you're on duty; and certainly when you come home, you're totally exhausted to sit down and go over things. Because we all have families and things to get on with.”

Midwife, age 51-55,
Female, on the register

Workplace and employer relationships were seen as central to revalidation



Professionals relied on employers for confirmation and to log hours and CPD



Employers could obstruct revalidation



In some cases, revalidation was misused as an alternative to ill-health retirement



Disabled professionals are more likely to experience unemployment or discrimination than non-disabled professionals.

“
I contacted my old Supervisor of
Midwives about revalidation.
[She said] ‘You can't revalidate’.
That was it, I left.”

Midwife, age 51-55, Female,
not on the register

Disabled professionals may move to work more flexibly, but this can cause isolation



Nursing home staff



Working as the only nurse means they can be isolated from people who can support review and confirmation.



Bank and agency staff



Agency managers aren't healthcare professionals so not seen as qualified to confirm revalidation.



Fewer ongoing relationships to draw on for support or confirmation.

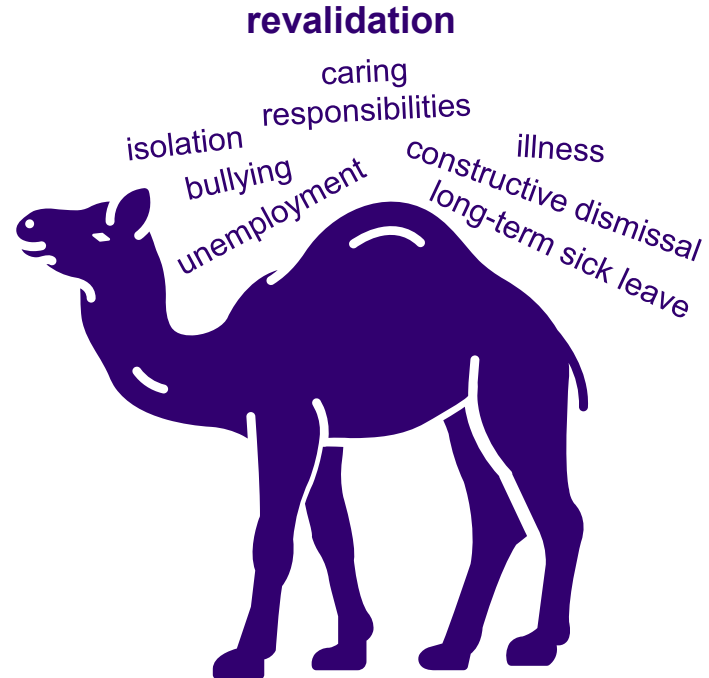


More limited access to CPD than those directly employed.

An easy or difficult revalidation happens alongside these other preexisting challenges

Many people we spoke to who had left the register had not wanted to leave nursing or midwifery.

But a challenging revalidation was, for them, the straw that broke the camel's back.



“ I missed nursing terribly; I missed the company, I missed the camaraderie. In a wee way, it's taken a while getting it round my head. I know physically I'm not fit for that anymore, but you still dream.”

Adult Nurse, age 56-60,
Female, not on the register


Many of these findings were reflected in previous work conducted on revalidation

Our previous work on Ambitious for Change and the IPSOS MORI Year 3 evaluation of Revalidation (2019) highlighted a number of similar issues to those we heard during this project.

A. A varied understanding of some of the requirements.

B. Particular challenges for those working in GP practices, agencies, the Bank and care homes.

C. A need for clear consistent, regular comms throughout the three-year cycle.



The learning for our communications also reflects findings from other work on professionals' experiences of our processes, beyond revalidation.

Section 3

Increased support and reasonable adjustments may help ensure equal access to revalidation.

Offering flexible options to meet revalidation criteria may be key to equity.

“Everybody was really nice, but [...] I didn't get my specific questions answered. I didn't get clarity. I didn't get verbal advice that matched the written advice. So, there was inconsistency, lack of clarity, confusion.”

**Adult Nurse, age 61-65,
Female, on the register**

There was a call for clear and consistent guidance using straightforward language

Clear and
consistent

Many found the website to be very useful. Some, though, received inconsistent information between website and phone

Professionals wanted clear definitions of 'good health' and how the NMC views professionals with disabilities

Online support and information for registrants with specific challenges

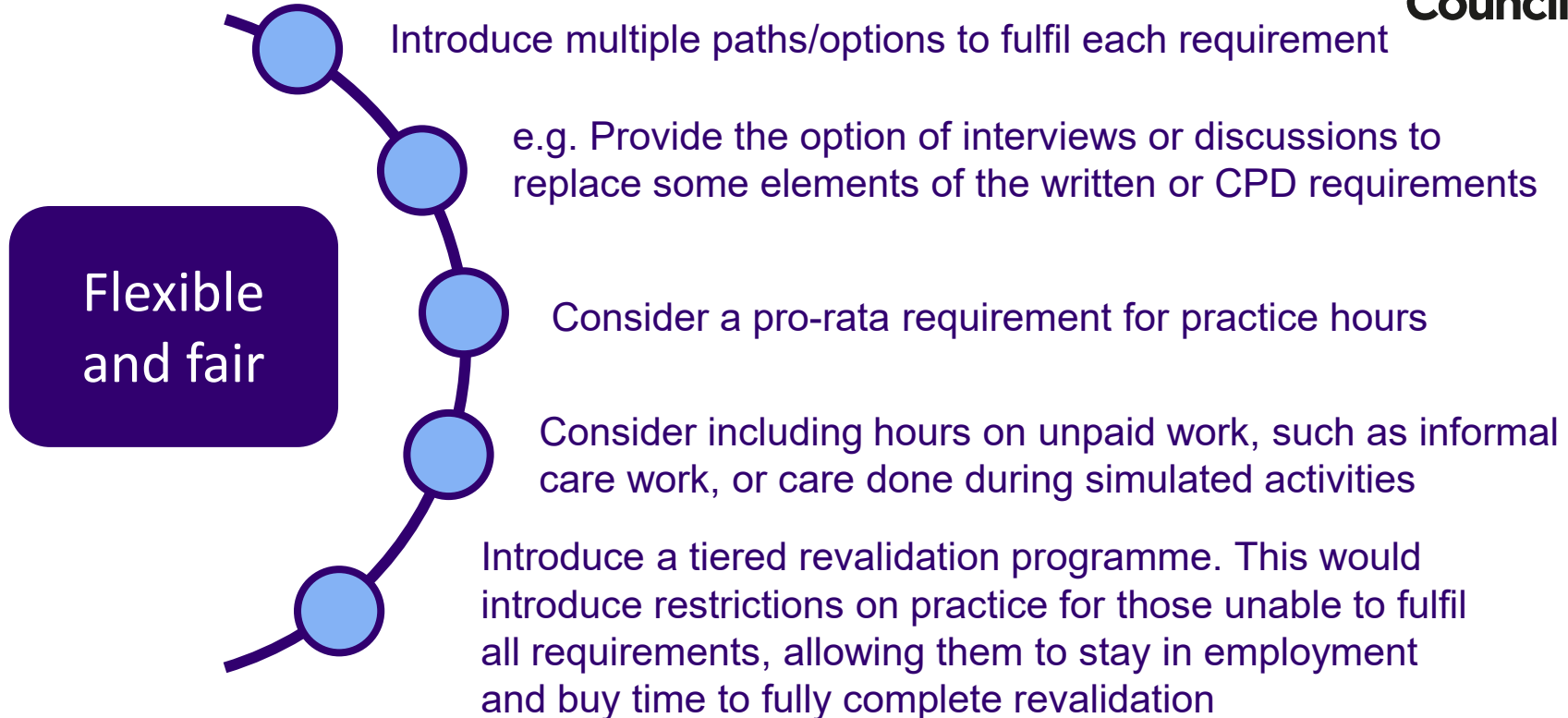
Support for those using different types of work to support revalidation

Reminder emails throughout the three-year period and no automated reminders for those on extensions.

“ I'd never consider myself to be disabled. I think terminology stops people seeking help.

(Adult Nurse, age 61-65, Female, not on register)

Participants wanted a flexible approach to fulfilling requirements, for example:



“
Caring for my parents encompassed many aspects of nursing. I do believe these caring duties are important in being included in the yearly cumulative amount required.”

Dual qualified nurse and midwife, age 56-60,
Female, not on the register

Professionals wanted proactive support from the NMC both for themselves and employers



“

Making it an absolute average period of recovery of eight weeks, that is no presumption of recovery at all. We presume recovery for people with mental illness, for our patients. Why can't we do that for our staff? ”

**Mental Health Nurse, age 60-65,
Male, not on the register**

Appendix

The purpose of revalidation

to **raise awareness** of the Code and professional standards expected of you



to provide you with the **opportunity to reflect** on the role of the Code in your practice as a nurse, midwife or nursing associate and **demonstrate that you are 'living' these standards**



to encourage you to **stay up to date in your professional practice** by developing new skills and understanding the changing needs of the public and fellow healthcare professionals



to encourage a **culture of sharing, reflection and improvement**



to encourage you to **engage in professional networks and discussions** about your practice

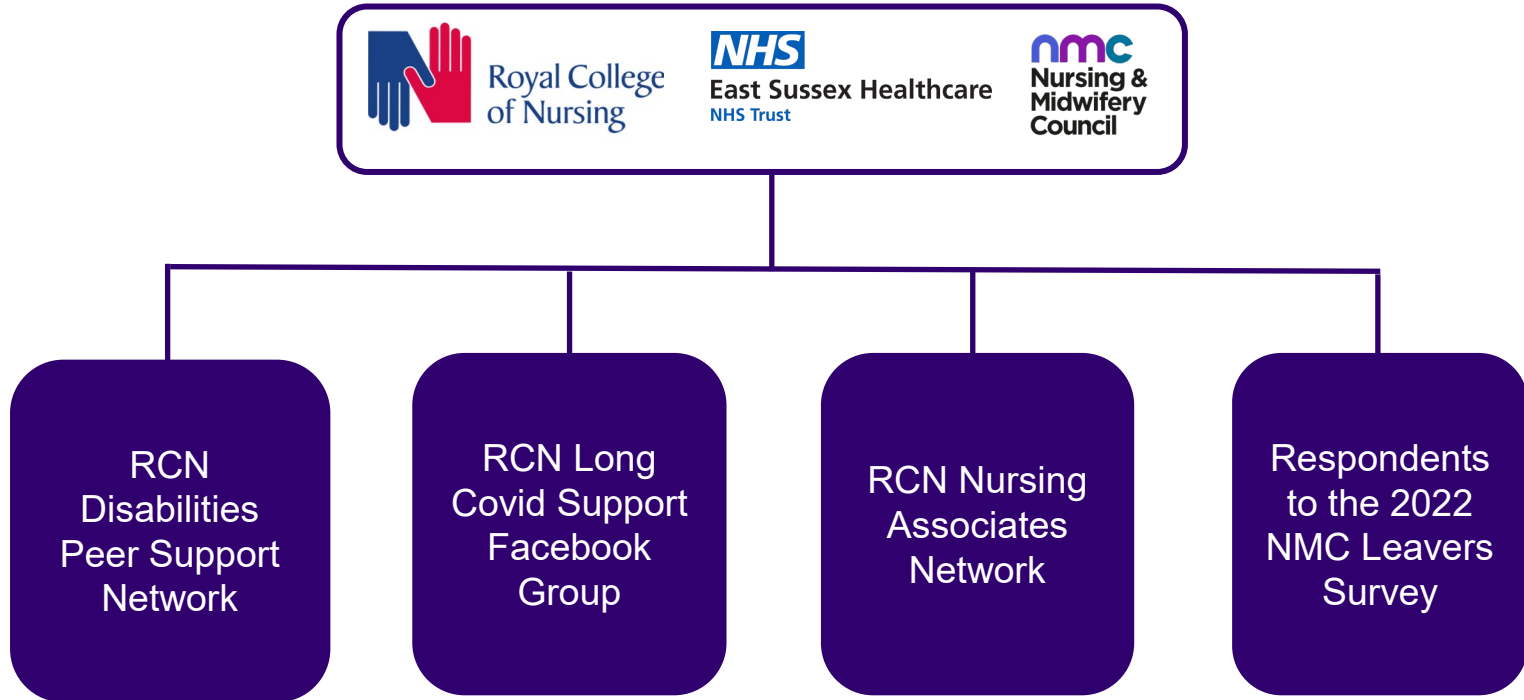


to strengthen **public confidence** in the nursing and midwifery professions



Responsibility
for revalidation
lies with the
professional.

We recruited professionals with the support of the project working group

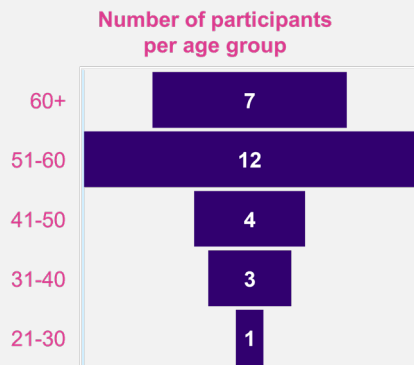


We heard from a variety of people.

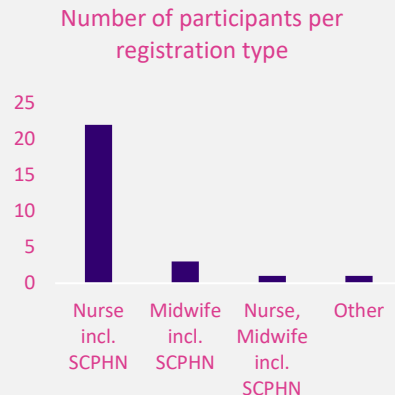
Where participants were from?



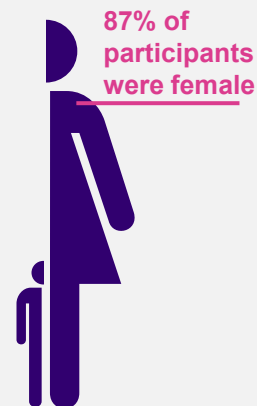
How old were they?



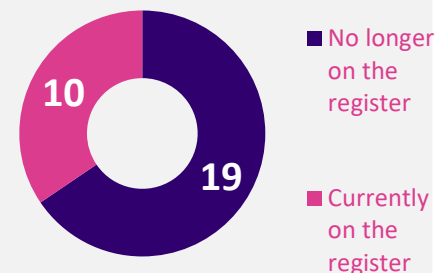
What type of registrants were they?



What was their gender?

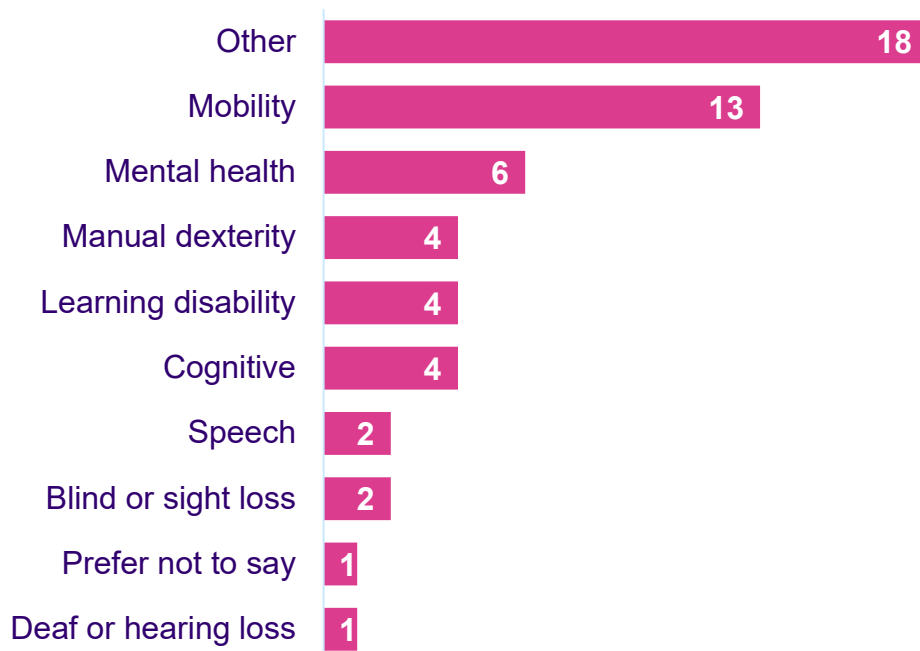


Were they still on the register?



We heard from people with many different impairments

Number of participants by impairment



26 / 27

participants
considered themselves
to be **disabled**

7 / 27

considered themselves
to be **neurodiverse**.
Two preferred not to say

9 / 27

had
Long Covid

Thank you

researchandevidence@nmc-uk.org
