Mentorship practice and revalidation

Date of submission: 17 December 2015; date of acceptance: 30 March 2016. doi: 10.7748/ns.2016.e10395

Abstract
Nurses and midwives who are registered with the Nursing and Midwifery Council (NMC) are required to renew their registration with the NMC. In April 2016, the NMC introduced revalidation, which replaces the requirements for renewal of registration set out in the post-registration education and practice standards. Every registrant should be aware of the revalidation process and requirements. Revalidation is linked to the professional standards for nurses and midwives set out by the NMC and known as The Code. Mentorship is an essential component of The Code; therefore, mentorship practice will assist registrants in meeting some or all of their revalidation requirements. As registered nurses, mentors will be required to reflect on their practice and update their preparation for mentorship. This article provides guidance on how mentorship preparation and practice can contribute to meeting revalidation requirements.

Keywords
education, mentor, mentorship, mentorship preparation, Nursing and Midwifery Council, registration, revalidation

Aims and intended learning outcomes
This article aims to provide guidance on how mentorship preparation and practice align with, and can be used to meet, revalidation requirements. After reading this article and completing the time out activities you should be able to:
» Explain the importance of revalidation for your professional practice.
» Summarise the actions to be taken to meet revalidation requirements.
» Outline the relationships between mentorship preparation, ongoing mentorship practice and revalidation.
» Develop a plan to align your ongoing mentorship practice with revalidation requirements, maximising the benefits of mentorship for your nursing or midwifery practice.

Introduction
Pre-registration nursing and midwifery students in the UK are supported and assessed in practice by registrants known as mentors, who will have undertaken a programme of study to prepare for the role. The Nursing and Midwifery Council (NMC), the profession’s regulatory body in the UK, outlines the professional standards required for mentorship preparation and maintenance of mentorship status in Standards to Support Learning and Assessment in Practice (NMC 2008).

In April 2016, the NMC implemented a revised process for renewing registration, referred to as revalidation, which must be undertaken every 3 years (NMC 2015a). This process is designed to integrate continuing professional development (CPD) and fitness to practise requirements when renewing nursing or midwifery registration, and replaces the post-registration education and practice (PREP) renewal process (NMC 2011).

One important aspect of revalidation is that registrants must engage in, reflect on and record the benefits of CPD for their professional practice. The NMC (2008) states that ‘mentors should be prepared to demonstrate to their employers, and the NMC quality assurance agents as appropriate, how they have maintained and developed their knowledge, skills and
competence as a mentor’. CPD activities undertaken by registrants in their role as a mentor can be used as evidence towards revalidation. These activities include annual updates, triennial reviews, and meetings with other mentors to discuss assessment and support issues and challenging circumstances (NMC 2008).

**TIME OUT 1**
Evaluate the past three years of your practice as a mentor. Identify and list the different aspects of your mentorship practice with students. Score each aspect of practice as follows: score 3 if you are confident that you have made progress and learned new skills; score 2 if your practice has been satisfactory; and score 1 if you are uncertain that this aspect of your practice has been the best it could be. Consider how these aspects of your mentorship practice align with the revalidation requirements listed in Table 1.

**Revalidation**
The requirements for revalidation are derived from the PREP standards but also include new elements. With regard to revalidation, registrants must meet the requirements listed in Table 1 (NMC 2015a, 2016a, 2016b). Guidance on how to revalidate is available from the NMC (revalidation.nmc.org.uk/what-you-need-to-do).

**TIME OUT 2**

**The Code and mentorship practice**
The NMC launched a revised version of The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives in March 2015 (NMC 2015b), which placed the interests of patients at the forefront of practice. The Code defines the professional standards that registrants in the UK must uphold to remain on the register, and are based on the following four themes (NMC 2015b):

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

Under revalidation, The Code and its themes are central to everyday practice. Registrants are required to use the four themes of The Code as the focus for their written reflective accounts and reflective discussion.

Standards 9.4 and 20.8 in The Code specifically refer to students, stating that registrants should ‘support students’ and colleagues’ learning to help them develop their professional competence and confidence’ and ‘act as a role model of professional behaviour for students and newly qualified nurses and midwives to aspire to’ (NMC 2015b). Registrants’ responsibilities to students are clear; they are instrumental in supporting students to develop behaviours such as compassion and professionalism. Significant responsibility is placed on nurses to ‘do the right thing’ and there are implications for public safety and the delivery of person-centred care.

**Revalidation and mentorship practice**
The Royal College of Nursing’s deputy president Rod Thomson emphasised the importance of ensuring that the process of revalidation recognises the range of registrant roles (Kleebauer 2014). The revalidation process gives registrants ‘the opportunity to reflect on the role of The Code in your practice as a nurse or midwife and demonstrate that you are “living” these standards’ (NMC 2015b). Mentors are important facilitators of learning, best practice and assessment, therefore their competence in these areas should be maintained and their practice should reflect the standards of The Code (NMC 2015b).

The requirements for revalidation and maintaining mentorship status align with the principles of professionalism, accountability and reflection on practice embodied in The Code (NMC 2015b). These similarities support the inclusion of mentorship activity as evidence towards revalidation (NMC 2015a). Table 2 identifies the links between mentorship practice and revalidation requirements and includes:

- The Standards to Support Learning and Assessment in Practice (NMC 2008) domains that underlie mentorship preparation.
- The requirements for registrants wishing to
engage with mentorship preparation and attain mentorship status (NMC 2008).

The activities that mentors must engage in, and provide evidence of, to demonstrate at triennial review that their mentorship practice is current (NMC 2008).

Revalidation provides an opportunity for mentors to articulate their thinking about student development and addressing challenging behaviours, such as a lack of compassion and person-centred care. Mentorship triennial review includes the requirement for an annual update. Although the triennial review may not coincide with the mentor’s renewal of registration, the evidence gathered in support of the mentor’s professional development can be used for the purpose of revalidation.

The revalidation process does not specifically address the perspective of mentors. However, there are parallels between mentorship preparation and practice and the revalidation process. Farrelly (2013) emphasised the importance of revalidation, stating that it should include opportunities for registrants ‘promoting a culture of professionalism and accountability through ongoing reflection and learning on the revised code and standards’. Peate (2015) stated that evidence of adherence to The Code as part of revalidation should include ‘feedback from patients, service users, carers and colleagues’. Kolyva (2013) recognised that registrants already incorporate this feedback in their professional development activities.

When supporting students, mentors receive feedback from them, as well as peers, and patients and their families. This feedback can be used as evidence towards meeting revalidation requirements. The mentor also has a responsibility to prepare students for revalidation as a registrant. This may involve supporting students to reflect on feedback received or to consider aspects of care delivery and the learning attained from this.

**TABLE 1. Revalidation requirements**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Further information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete a minimum number of practice hours and continuing professional development (CPD) hours in the 3 years preceding renewal of your registration.</td>
<td>The requirement is for 450 practice hours, or 900 hours if revalidating as both a nurse and midwife, and 35 CPD hours. The number of practice hours relating to mentoring is not stipulated (Nursing and Midwifery Council (NMC) 2015a).</td>
</tr>
<tr>
<td>Demonstrate how you have used practice-related feedback from patients, colleagues and others to improve your practice.</td>
<td>The NMC does not explicitly link practice-related feedback to the requirement to provide five written reflective accounts. However, reflecting on how you responded to feedback is one way to demonstrate evidence of insight and improvement. For example, you could include student evaluations of the mentorship support you provided to demonstrate how you have enhanced practice placement planning with students over time.</td>
</tr>
<tr>
<td>Provide a minimum of five written reflective accounts on your practice, based on the requirements of The Code (NMC 2015b), your CPD activities and feedback received as part of everyday practice.</td>
<td>The NMC (2015a) recommends that your reflective accounts align with The Code (NMC 2015b) and that it may be useful to include the ways you will use feedback to enhance your practice. The NMC does not stipulate that evidence must relate specifically to mentorship, but it is logical to include this where mentorship is a significant part of your role.</td>
</tr>
<tr>
<td>Engage in a professional development discussion with another NMC registrant, and centre your reflective discussions on The Code (NMC 2015b), your CPD activities and practice-related feedback.</td>
<td>This discussion could involve more than two people, and the other registrant could be a placement link lecturer or a fellow mentor.</td>
</tr>
<tr>
<td>Seek confirmation from a third party that you have met the revalidation requirements.</td>
<td>The NMC (2015a) indicates that the third party confirmation should be from someone well placed to comment on your practice with reference to the requirements of The Code (NMC 2015b), for example your line manager.</td>
</tr>
</tbody>
</table>

(Nursing and Midwifery Council 2015a, 2016a, 2016b)

**TIME OUT 3**

If you have completed an NMC-approved mentorship preparation programme in the 3 years preceding your revalidation, reflect on your learning and engagement with the programme. Has your attitude to supporting students to learn in practice changed? If so, write a brief summary of how this has changed.
<table>
<thead>
<tr>
<th>Requirements and competencies for a mentor (NMC 2008)</th>
<th>Links to The Code (NMC 2015b)</th>
<th>Requirements for mentorship preparation (NMC 2008)</th>
<th>Requirements for maintaining mentorship status (NMC 2008)</th>
<th>Requirements for revalidation (NMC 2015a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have developed their own knowledge, skills and competency beyond that of registration through continuing professional development (CPD) - either formal or experiential learning – as appropriate to their support role.</td>
<td>Theme 2: Practise effectively. Theme 3: Preserve safety. Theme 4: Promote professionalism and trust.</td>
<td>Five protected study days (40 hours). Five unprotected study days (40 hours). Have developed own knowledge, skills and competence beyond registration.</td>
<td>Annual update mentorship practice (a minimum of one participatory learning opportunity each year).</td>
<td>35 hours of CPD during the three years before renewal of registration (20 hours of which must be participatory learning or learning with others) in accordance with principles of The Code (NMC 2015b).</td>
</tr>
<tr>
<td>Establishing effective working relationships.</td>
<td>Theme 1: Prioritise people. Theme 2: Practise effectively.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment and accountability.</td>
<td>Theme 3: Preserve safety. Theme 4: Promote professionalism and trust.</td>
<td>Supervised and assessed mentoring of a student by an existing mentor in practice.</td>
<td>Mentor a minimum of two students in a 3-year period.</td>
<td>Obtain at least five examples of practice-related feedback. Write at least five reflective accounts showing how you have reflected on feedback to improve your practice.</td>
</tr>
</tbody>
</table>

(Nursing and Midwifery Council 2015a, 2016a, 2016b)
Generating evidence for revalidation through mentorship practice

Continuing professional development

Those who are new to mentorship must undertake an NMC-approved mentorship preparation programme, which can be used to meet the 35 hours of CPD required for revalidation. These programmes are usually 10 days (80 hours) in duration. Mentors are required to maintain and develop their mentorship knowledge, skills and competence (NMC 2008). Many managers incorporate mentorship discussions in local appraisal procedures and personal development planning processes to support mentors to meet their CPD requirements. The NMC requires that mentors undertake an annual update and a triennial review, which can be used as evidence towards CPD hours for revalidation. Most universities provide mentorship update programmes, and there are online learning activities that registrants can undertake to meet the standards for maintaining mentorship status (NMC 2008). Employers may encourage staff to access online modules, since this is cost effective. Attending professional conferences that focus on mentorship or pre-registration nursing and midwifery education can count towards CPD activity for revalidation if registrants are able to identify opportunities to address gaps in their learning, or gain evidence for revalidation.

In Scotland, a supplementary core curriculum framework for mentorship preparation, the National Approach to Mentor Preparation for Nurses and Midwives, has been developed and updated by NHS Education for Scotland (NES) (2013). The framework aims to ensure that mentorship preparation meets the Standards to Support Learning and Assessment in Practice (NMC 2008) in a consistent and transferable manner. It includes guidance for mentors on maintenance of mentorship status and associated CPD activities, and may also help align mentorship practice with revalidation requirements.

NMC-approved mentors should maintain a record of their annual updates and reflect on any learning, documenting how they have improved their mentorship practice and enhanced the support they provide to students. The revalidation process can improve competency and increase motivation, since it helps individuals to identify areas for improvement and appreciate the areas of practice in which they excel.

Feedback

It is important that mentors consider the different ways to gather feedback, including the people who are best equipped to provide feedback about their role in the assessment of learning in practice. It is advisable to seek several opinions. Feedback can be obtained from triennial reviews and pre-registration students’ views on mentoring practice. Mentors who wish to gain feedback from students should wait until the end of the placement to avoid the risk of coercion. Feedback on the mentor’s practice and their ability to balance different roles may also be provided by peers, managers or university link tutors.

Feedback need not be formal or written. Student feedback can be verbal; however, the mentor must be able to verify this if it is included in their evidence for revalidation. Most universities have a practice learning questionnaire or survey, which allows pre-registration nursing and midwifery students to provide general feedback following completion of each practice learning experience. Written feedback can be gathered from this. Some practice learning areas have developed specific questionnaires or evaluation tools for students to complete at the end of each practice learning experience. Mentors may also receive regular individual feedback from students as part of their mentorship practice.

NES conducts an annual nursing student, mentor and ward manager survey,
from which a report is generated and provided to each university, as well as practice education professionals. It can provide valuable mentorship feedback from students that can enable mentors to enhance their practice. While this feedback is not individualised, the report emphasises the strengths and weaknesses of mentorship in different practice areas and provides general feedback on how to improve the work of the mentorship team.

**TIME OUT 5**
Ask your manager or senior charge nurse for a copy of the pre-registration student feedback for your practice area. Determine the positive elements of the students’ practice learning experiences and identity how you contributed to these as a mentor. What are the negative elements of the students' experience? Make a list of any areas for improvement in your mentorship practice?

Mentors can also obtain feedback from other staff involved in mentorship, such as fellow mentors or practice education professionals. University link tutors often visit students on practice learning experiences, especially when a student is experiencing difficulty, and this provides an opportunity to seek feedback on mentorship practice. Feedback may also prompt a mentor to reflect on their practice, for example if a mentor receives feedback that they always seem busy, they may change the times they meet with students or trial different approaches to providing support to students at important times.

**Reflection**
The five written reflective accounts that registrants must provide for revalidation do not need to be limited to direct patient care, however they should reflect the themes of The Code (NMC 2015b). Reflections can be based on CPD or mentorship feedback. Reflections on mentorship and The Code should directly influence mentorship practice and student learning, which should ultimately improve patient care. There are many templates and models for reflection, but the NMC (2016c) stipulates that its reflective accounts and reflective discussion forms must be used for this purpose to record any accounts and discussions for revalidation (NMC 2015a). The NMC (2015a) also requires that registrants write their reflections and then discuss them with another registrant. Mentors are encouraged to engage in reflective discussions with other mentors when considering their mentorship practice based on CPD or feedback, since this will also help to meet the requirements of their annual update and triennial review (Table 2). NES (2016a) has developed a community of practice website (www.knowledge.scot.nhs.uk/revalidation.aspx) that provides detailed guidance on revalidation and reflection for registrants.

**TIME OUT 6**
Visit tinyurl.com/zlps8vx and look at the reflective accounts and reflective discussion forms produced by the NMC (2016c). Review any feedback you have been given about your performance as a mentor and reflect on the professional development that this feedback demonstrates.

**Collating and storing evidence**
The NMC (2015a) recommends that registrants keep the evidence that they have met the revalidation requirements in a portfolio. A portfolio is also useful for maintaining accurate records of CPD activities. The NMC (2015a) states that records of CPD undertaken must contain:
- The CPD method.
- A description of the topic and how it related to the registrant’s practice.
- The dates on which the activity was undertaken.
- The number of hours (including the number of participatory hours).
- The identification of the part of The Code most relevant to the activity.
- Evidence that the registrant undertook the CPD activity.

**TIME OUT 7**
Visit tinyurl.com/jpp8n5c and refer to the NMC’s (2015a) checklist of requirements and supporting evidence for completing your portfolio. Think about how you would need to adapt any evidence you already have to meet revalidation requirements, and outline a plan for this.

The portfolio of evidence for revalidation can be paper or electronic, and there are various resources available to help registrants compile evidence, such as the electronic (e) portfolio from RCNi, the
USEFUL RESOURCES

Royal College of Nursing’s publishing company (rcni.com/portfolio), which is free to online subscribers of Nursing Standard or any of the other ten RCNi journals; it can also be accessed as a standalone subscription. In Scotland, mentors have access to the Nursing and Midwifery Career Long ePortfolio (NES 2016b). There is a section in this resource where Stage 2 mentors can provide evidence to meet the NMC requirements for their annual update and triennial review. This eportfolio has been amended to reflect NMC revalidation requirements.

The NMC revalidation website (revalidation.nmc.org.uk) provides up-to-date information on the new process. The RCN online revalidation resource (www.rcn.org.uk/professional-development/revalidation) also provides information and resources for registrants, individuals who have been asked to be a confirmer, and employers. Links to revalidation resources are also available on the NES revalidation community of practice website (www.knowledge.scot.nhs.uk/revalidation.aspx).

Conclusion
Mentorship preparation and mentorship practice align with, and can contribute to, the evidence required for revalidation, the NMC’s new process of registration for nursing and midwifery professionals. Important aspects of revalidation include: the need to demonstrate that 450 practice hours have been undertaken; the requirement to seek and reflect on feedback from peers, colleagues, patients and their families, and/or, if applicable, students; and the requirement for, and benefits of, reflective discussion with another NMC registrant.

The NMC does not stipulate the link between mentorship activities and revalidation requirements, however mentorship practice to support learning can be used as evidence towards revalidation. Therefore, mentors should consider how best to align their triennial review and the revalidation process, to ensure that gathering and preparing evidence can serve these dual purposes. Through the mentorship role, registrants are provided with invaluable practical opportunities to reflect on practice. The annual updates and triennial reviews required for mentors involve the collation of evidence that can be aligned with the requirements of The Code (NMC 2015b), demonstrating the relevance and importance of mentorship practice in the revalidation process.

TIME OUT 8
Now that you have completed the article, you might like to write a reflective account as part of your revalidation.

References


Nursing and Midwifery Council (2011a) The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives. tinyurl.com/zy7uyjo (Last accessed: 10 May 2016.)

### Mentorship practice and revalidation

**TEST YOUR KNOWLEDGE BY COMPLETING SELF-ASSESSMENT QUESTIONNAIRE 848**

1. Which of the following mentorship activities can be used as evidence for revalidation?
   - a) Triennial review
   - b) Annual update
   - c) Meeting with other mentors to discuss issues and challenging circumstances
   - d) All of the above

2. The Nursing and Midwifery Council (NMC) specifies that for revalidation:
   - a) Evidence from mentors must be based on their mentorship roles
   - b) Reflective accounts from mentors must be in response to feedback on their role as mentors
   - c) Reflective accounts from mentors must focus on their continuing professional development (CPD) as mentors
   - d) Registrants must engage in a professional development discussion with another registrant, focusing on The Code, CPD and practice-related feedback

3. Which is not a central theme of The Code?
   - a) Promote learning
   - b) Practise effectively
   - c) Preserve safety
   - d) Prioritise people

4. The NMC Standards to Support Learning and Assessment in Practice require mentors to:
   - a) Complete revalidation
   - b) Undertake a programme of study to prepare them for revalidation
   - c) Demonstrate that they have maintained and developed their knowledge, skills and competence as mentors
   - d) Complete a minimum of 35 CPD hours in mentoring practice

5. The Code specifies that:
   - a) All registrants should support students’ learning to help them develop professional competence and confidence
   - b) Mentors are solely responsible for supporting students’ learning to help them develop professional competence
   - c) Mentors are solely responsible for acting as role models of professional behaviour
   - d) Mentors are solely responsible for supporting students’ learning to help them develop professional confidence

6. Which of the following statements is true?
   - a) Mentorship work may not be included in revalidation evidence
   - b) Mentorship is a legitimate focus for revalidation evidence
   - c) Feedback from students may not be used to support revalidation
   - d) When used as evidence for revalidation, feedback from students does not need to be anonymous

7. NMC-approved mentorship preparation programmes comprise:
   - a) 40 protected study hours
   - b) 40 unprotected study hours
   - c) 40 protected study hours plus 40 unprotected study hours
   - d) 80 protected study hours

8. Which statement is false?
   - a) To attain mentorship status, mentors must undergo an NMC-approved mentorship preparation programme
   - b) NMC-approved mentorship preparation is usually a 10-day (80-hour) programme
   - c) An NMC-approved mentorship preparation programme can meet the CPD requirements for revalidation in full
   - d) Online learning modules do not count towards CPD requirements for revalidation

9. Feedback on your mentoring practice:
   - a) Must be written
   - b) Can be verbal
   - c) Must be from other NMC registrants
   - d) Need not be verifiable

10. To maintain mentorship status, individuals should mentor:
    - a) A minimum of three students in a 2-year period
    - b) A minimum of five students in a 2-year period
    - c) A minimum of two students in a 3-year period
    - d) A minimum of five students in a 3-year period

---

**How to complete this assessment**

This self-assessment questionnaire will help you to test your knowledge. It comprises ten multiple choice questions that are broadly linked to the article starting on page 56. There is one correct answer to each question.

- You can test your subject knowledge by attempting the questions before reading the article, and then go back over them to see if you would answer any differently.
- You might like to read the article before trying the questions.

The correct answers will be published in Nursing Standard two weeks later.

Subscribers making use of their RCNi Portfolio can complete this and other questionnaires online and save the result automatically.

Alternatively, you can cut out this page and add it to your professional portfolio. Don’t forget to record the amount of time taken to complete it.

You may want to write a reflective account based on what you have learned. Visit journals.rcni.com/r/reflective-account to find out how

---

This self-assessment questionnaire was compiled by Beth Knight

The answers to this questionnaire will be published on 29 June

Answers to SAQ 846 on moving and handling, which appeared in the 1 June issue: