For nurses and midwives with more than one registration

What we mean by dual registrant

Each person registered with the Nursing and Midwifery Council (NMC) is a nurse or a midwife or both. For the purpose of this guidance we refer to those who are registered both as a nurse and a midwife as dual registrants.

We recognise that some nurses and midwives are also registered as a Specialist Community Public Health Nurse (SCPHN) or have additional nursing registrations, and we deal with these separately in this guidance. For the purposes of revalidation we do not refer to those with these additional registrations as dual registrants.

If you are a dual registered nurse and midwife your NMC Online homepage will look like this:

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Date registered</th>
<th>Registration status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Midwife</td>
<td>05/02/1969</td>
<td>Effective</td>
</tr>
<tr>
<td>Registered Nurse - Adult</td>
<td>26/06/1964</td>
<td>Effective</td>
</tr>
</tbody>
</table>

Practice hours requirement and revalidation

For revalidation, all nurses and midwives must demonstrate that they have undertaken a minimum number of practice hours relevant to their scope of practice. The NMC register is a live and practising register, and a nurse or midwife’s registration should always reflect their current scope of practice. The practice hours requirements are designed to help nurses and midwives maintain safe and effective practice, and keep their skills up to date.

In order to meet the practice hours requirement to maintain both of their registrations, dual registrants must have undertaken a minimum of 900 hours over the three year period since their registration was last renewed or they joined the register. This includes at least 450 hours for nursing and 450 hours for midwifery.

The practice hours requirement was already in place under Prep, but revalidation is more robust than the Prep process it builds on. All nurses and midwives must provide evidence of how they are meeting the revalidation requirements within their role/s.

Revalidation will encourage nurses and midwives to reflect on their practice more than they may have previously, and we know that dual registrants might have questions about whether what they are doing meets the requirements for maintaining both of their registrations.

Dual registered nurse/midwives

Dual registered nurse/midwives might be working in a number of different ways:
Example A: a dual registrant practising in two different roles

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

The other requirements for revalidation are the same for dual registrants as for nurses and midwives who only have one registration. Dual registrants will only have to obtain a total of five pieces of practice-related feedback and write five reflective accounts, not ten. However, they should think about how they might meet all of the requirements of revalidation across both 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.

Example B: a dual registrant practising in one role

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

Some dual registrants will be working in a role where they cannot demonstrate that they are relying on both registrations. For example, an individual has been working solely as a general practice nurse for the last three years. When they complete their revalidation application they should specify nursing as their scope of practice. They cannot select any individual tasks undertaken as part of their practice as a practice nurse (for example, record-keeping or examining women) in order to maintain their midwifery registration.

Some dual registrants will be working in a role where they can demonstrate they are relying on both registrations. For example, someone is working as a midwife in a tertiary hospital and is using their nursing skills regularly, in addition to relying on their midwifery skills. If they are able to demonstrate they are relying on both their nursing and midwifery knowledge, skills and experience in this role, then they can renew both registrations. They will still need to declare a minimum of 900 hours – at least 450 hours for nursing and at least 450 hours for midwifery – and they cannot double-count these hours.

As a regulator, we regulate professions, not duties or tasks. Nursing and midwifery are separate professions and for those people who have decided to practise in one role where they are solely relying on their skills, knowledge and experience as a nurse, or solely on their skills, knowledge and experience as a midwife, it is not necessary for them to maintain both of their registrations.

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

Example C: a dual registrant who is also a registered Specialist Community Public Health Nurse (SCPHN)

The same information outlined above also applies for dual registered nurse/midwives who are on the SCPHN part of the register.
A dual registered nurse/midwife is working as a SCPHN. They will need to complete a minimum of 900 hours of practice in order to maintain both of their registrations – 450 hours for nursing and 450 hours for midwifery.

If a dual registrant is working solely in a SCPHN role and they are only relying on one of their registrations, then they may choose to lapse one registration only – as long as they maintain their other registration. For example, if they are not relying on their 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.

For more information about midwife/SCPHNs please see Guidance sheet 2 in How to revalidate with the NMC.

Example D: a nurse who is undertaking an 18 month midwifery programme

A registered adult nurse enters an 18 month pre-registration midwifery programme. They must have been registered as an adult nurse with the NMC in order to enter the programme. However, 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.)

A nurse who is undertaking an 18 month midwifery programme can revalidate their nursing registration during the course 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 in order 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.

A student midwife who cannot meet the requirements to revalidate their nursing registration (for instance because they have not practised as a nurse in the last three years) 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 an individual does not undertake any midwifery practice following an 18 month midwifery programme, and wishes to rejoin the nursing part of the register, they will need to meet the requirements for readmission.

Other types of additional registration

Some nurses and midwives are also registered as a SCPHN or have additional nursing registrations, and we deal with these situations below. For the purposes of revalidation we do not refer to those with these additional registrations as dual registrants.

Nurses with more than one specialism

Some nurses will have trained in more than one branch of nursing. They are not considered dual registrants, and they will only need to complete 450 hours of practice. The activities they undertake to meet this requirement will relate to their current scope of practice. For example, they might have initially trained as an adult nurse and now be working in children’s nursing. Their practice hours can relate to their current scope of practice as a children’s nurse.
Nurses with multiple registration entries

Some nurses will have entries on sub-part 1 and/or sub-part 2 of the register. We do not make any distinction between these sub-parts of the nursing register for the purpose of revalidation. A second level nurse 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 or a midwife. This includes undertaking at least 450 hours of nursing practice. They should meet the requirements within their current scope of practice.

Nurses who are also registered as a SCPHN

Nurses who have gone on to complete a SCPHN programme and are now practising in a SCPHN role must undertake 450 hours of practice. The hours they work will be relevant to their current scope of practice as a nurse/SCPHN. They are not expected to evidence 450 hours of practice as a nurse and 450 hours of practice as a SCPHN, because the practice hours relate to maintaining their place on one part of the register – the nursing part. There is no separate practice hours requirement for their SCPHN registration.

Midwives who are also registered as a SCPHN

There are also a small number of midwives who do not have nursing registration but have gone on to complete a SCPHN programme – they must undertake 450 hours of practice. The hours they work will be relevant to their current scope of practice as a midwife/SCPHN. They are not expected to evidence 450 hours of practice as a midwife and 450 hours of practice as a SCPHN, because the practice hours relate to maintaining their place on one part of the register – the midwifery part. There is no separate practice hours requirement for their SCPHN registration.

For more information about midwife/SCPHNs who are only practising in a SCPHN role, please see Guidance sheet 2 in How to revalidate with the NMC.

Readmission to the register

A dual registrant working in a role where they do not undertake any practice that relies on one of their registrations will be unable to meet the practice hours requirement for that registration, and will therefore need to consider cancelling that registration. Allowing their registration to lapse does not mean they are giving up their qualification. They can apply for readmission if they want to use this qualification again in the future.

Please see our website for more information about readmitting to the register, including information on Return to Practice courses.

Please note: we are not able to comment on individual circumstances and advise whether a person should, or is able to, maintain both of their registrations. Individuals will need to use their own professional judgment to ensure their registration with the NMC reflects their current scope of practice.

Please remember that you must always work within the limits of your competence, as set out in The Code: Professional standards of practice and behaviour for nurses and midwives. You must also ensure that you have an appropriate professional indemnity arrangement in place for each role that you work in. If you work in more than one role you may need more than one indemnity arrangement.