

# Return to practice – a guide for returners

For returning nurses across the London region: last updated  
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# Introduction to Return to Practice

The Return to Practice programme for nurses is run by Health Education England (HEE) and has so far supported nearly 8000 returning nurses since its inception in 2014, recognising that supporting experienced nurses to return to practice is an effective route to strengthen our workforce and bring expertise back into practice.

If you have left practice and are unable to meet the [readmission requirements](#) set out by the Nursing and Midwifery Council (NMC), the return to practice programme might be the right option for you.

Your wealth of experience and your life skills are vital for today's NHS and care sector. Colleagues in practice placement settings are ready to welcome you, make you part of the team and get you up and running as a registered nurse as quickly as possible.

Undertaking the RtP programme can feel like a daunting prospect when you have been away from nursing for a while, but we want to assure you that we understand the challenges, and the team will work with you to give you the best possible chance of success. There will be a huge body of goodwill, support and encouragement following you through the programme and the HEE London RtP team, your university, your practice educators and the RtP bureaus will support you if you are unsure about anything. In this guide, we will explain in detail the two different pathways to complete the RtP programme and provide information about the Test of Competence (ToC).

After successful completion of the programme and regaining NMC registration, you will be ready to take up a registered nursing role.

## How is the programme funded?

HEE London will pay for the tuition fees associated with the programme and will also provide you with a bursary to cover any out-of-pocket expenses, such as book costs, travel and childcare, depending on the route you choose to return. Funding for both tuition fees and bursary are paid by HEE London directly to your chosen university, who then manages the transfer of the bursary to you. You are not expected to apply for this funding as it is managed between your university and HEE London for you.

# How long does it take to complete the return to practice programme?

The programme usually takes between three and nine months to complete, depending on how long you have been away from practice and how quickly you complete your clinical competencies. The length of time required to complete the programme will be established during any interviews or discussions you have with your university and the placement provider.

## The Return to Practice Programmes in London

The programme varies for each university, but as a standard, all programmes consist of theoretical study days at the university and a placement in a clinical setting to undertake practice-based learning.

There are separate return to practice programmes for each of the following fields of nursing:

- Adult Nursing
- Child Nursing
- Mental Health Nursing
- Learning Disability Nursing
- General Practice Nursing
- Specialist Community Public Health Nursing (this includes school nursing, health visitors, occupational health nursing, and family health nursing)

Please note that some universities run one cross-field programme, with specific input from staff from different fields as and when needed.

There are four universities that offer the RtP programme in London:

### Kingston and St Georges, University of London

For further information about the programme offered at Kingston and St Georges University of London, please visit [this page](#), or contact:

Helen Freedman for RtP nursing: [h.freedman@sgul.kingston.ac.uk](mailto:h.freedman@sgul.kingston.ac.uk)

Suzie Martin for RtP general practice nursing: [s.e.martin@sgul.kingston.ac.uk](mailto:s.e.martin@sgul.kingston.ac.uk)

### University of Hertfordshire

For further information about the programme offered at the University of Hertfordshire, please visit [this page](#), or contact:

Leigh Vincent: [l.vincent4@herts.ac.uk](mailto:l.vincent4@herts.ac.uk)

### City University of London

For further information about the programme offered at City University of London, please visit [this page](#), or contact:

Maria Lynch: [maria.lynch@city.ac.uk](mailto:maria.lynch@city.ac.uk)

### University of Greenwich

For further information about the programme offered at University of Greenwich, please visit [this page](#), or contact:

Teresa McMahon or Rona Dury: [fehhs-programme-support@greenwich.ac.uk](mailto:fehhs-programme-support@greenwich.ac.uk)

# Routes for returning to practice

Did you know that you can undertake the programme either as a paid permanent employee of a trust (should a vacancy be available for this option), or through a voluntary, unpaid, time specific placement organised by the university?

## Option 1: Unpaid/voluntary placement route

With the voluntary (also called unpaid) route, you are not paid whilst you are on your training, so you will not receive a salary during your placement, but you will receive a £1000 bursary from HEE London. The benefit of this option is that you can maintain your current financial situation – crucial if you are on benefits, or have another job, for example.

## Benefit of unpaid/voluntary placement route: flexibility

The voluntary/unpaid route can also offer more flexibility in terms of length and regularity of your clinical placement hours, allowing the programme to fit in with your home/personal life, which is important if you have dependants, families, or other employment.

When your university has supported you to find a suitable clinical placement, we would advise you to have discussions with your clinical placement about your shift preferences during any formal/informal interview stages to ensure they also consider how to accommodate any specific requirements, whilst also managing your own expectations, as you may be required to show some flexibility.

## Unpaid/voluntary placement application, recruitment, and selection process

Whilst we encourage our London universities to offer the same application, recruitment and selection process, each will differ slightly. However, as a rule, the process of applying for an unpaid/voluntary RtP programme will involve a process like the one set out below:

Step 1: Returner completes the programme application to their chosen university.

Step 2: The university will either liaise with the returner to discuss the placement preferences and begin the process of finding a suitable clinical placement or will advise the returner to

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source their own placement by signposting the returner directly to specific trusts or to their local RtP bureau lead for support..

Step 3: The university may require the returner to undertake literacy and numeracy tests, which the returner must pass before being formally accepted onto the programme.

Step 4: The returner will be invited to undertake an interview with the university. In some cases, the interview will also be held in partnership with the clinical placement.

Step 5: If the returner is successful at the interview and passes any required literacy and numeracy tests, the returner is then formally accepted onto the programme and allocated a clinical placement.

Step 6: The university will provide the returner with a conditional offer and will begin the process of arranging the returner's registration onto the programme, undertake occupational health checks, Disclosure and Barring Service (DBS) checks and reference checks, and provide the returner with a uniform.

Step 7: The clinical placement will confirm the placement arrangements and ensure a full induction is in place for the returner.

We would strongly advise you to contact your chosen university for further information about their application, recruitment, and selection process.

### Option 2: Paid/employer-led route

With the paid/employer-led route, you will usually be expected to search and apply for return to practice vacancies via NHSJobs before applying to the university, but we would advise you to contact the university as a first step to register your interest and find out more specific information about the application and recruitment process involved with this route.

If your application is accepted, you will usually be invited to a joint interview with the employing trust and the university that works in partnership with that trust. If successful at the interview, the trust will offer you a position, and will pay you the salary equivalent of a Healthcare Assistant role for the duration of the programme until you have successfully completed and re-registered with the NMC. At that point, you will then be uplifted to a permanent Registered Nurse position. Through this route, you do not receive the £1000 student bursary, however you will be paid a salary and be included in the pension scheme when you start your practice hours.

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It is important to note that your specific RtP clinical placement hours will not take up all your contracted hours you are employed for. Your remaining contracted hours will involve working as a Healthcare Assistant. We would advise you to discuss how those hours will be differentiated during the application and interview process.

### **Benefit of paid/employer-led route: earn whilst you learn and guaranteed job security**

The employer led/paid route offers the benefit of allowing you to work during your studies and gives you peace of mind that you have a permanent nursing role secured upon successful completion of the programme. You will also have protected time to attend any required university study days.

### **Paid/employer-led application, recruitment and selection process**

Whilst we encourage all our London trusts and universities to offer the same application, recruitment, and selection process, each will differ slightly. However, as a rule, the process of applying for a paid/employer-led programme will involve a similar process as set out below:

Step 1: Returner completes an initial application to the university or applies for a RtP vacancy through [NHSJobs](#) or trust website. Do check NHS Jobs on a regular basis for these adverts.

Step 2: If the returner's application is successful, they will be invited to an NHS values-based interview with both the university and the trust. The university may also arrange for the returner to undertake literacy and numeracy tests either before or after the formal interview.

Step 3: If the returner passes any required literacy and numeracy tests and is successful at the interview, the returner will be offered a place on the programme by the university and will also be offered a contract of employment as a Band 3 returner by the trust.

Step 4: If the returner accepts the offer made by the university and the trust, the university will then send a conditional offer to the returner, arrange the returner's registration onto the programme and provide the returner with a uniform, unless the trust has specified otherwise.

Step 5: The trust will undertake occupational health checks, DBS check and reference checks. They will also confirm the returner's employment start date and ensure there is a full induction in place.

## What can I do to prepare for the literacy and numeracy tests and any interviews?

Regardless of the route you choose to pursue, you may be expected to undertake a literacy and numeracy test, and an interview with the university course provider and your prospective clinical placement/employer, however we would advise you to check with the university what their application and shortlisting process involves.

### Preparing for success: Literacy and Numeracy Tests

The literacy test evaluates a candidate's ability to read, write and comprehend text in English. It is designed to test basic skills like grammar and punctuation as well as the ability to understand a text and pick out key information.

It is important for the NHS to check your literacy skills as your role is likely to involve processing medical information, as well as communicating with doctors, medical staff, and patients in person, by phone, or via email.

The questions are typically multiple choice so make sure to read the questions carefully.

As the test is multiple choice, this means that you don't technically need to prepare anything in advance. However, it is a good idea to get familiar with the types of questions beforehand, so you don't make mistakes on the day. Brush up on your literacy skills and take some online practice tests.

The numeracy, or mathematics test, will evaluate your ability to do basic calculations and apply numerical reasoning to different situations. The NHS looks for candidates with strong numeracy skills that will help them excel in the role and resolve problems quickly.

You will encounter some questions that test you on addition, subtraction, multiplication, and division. You may also be questioned on more complex equations to do with calculating drug doses and other mathematics-based tasks that could come up in your NHS role. Doing practice

questions is a great way to familiarise yourself with the types of questions you may find on the test. This will help you stay calm and answer questions efficiently on that day.

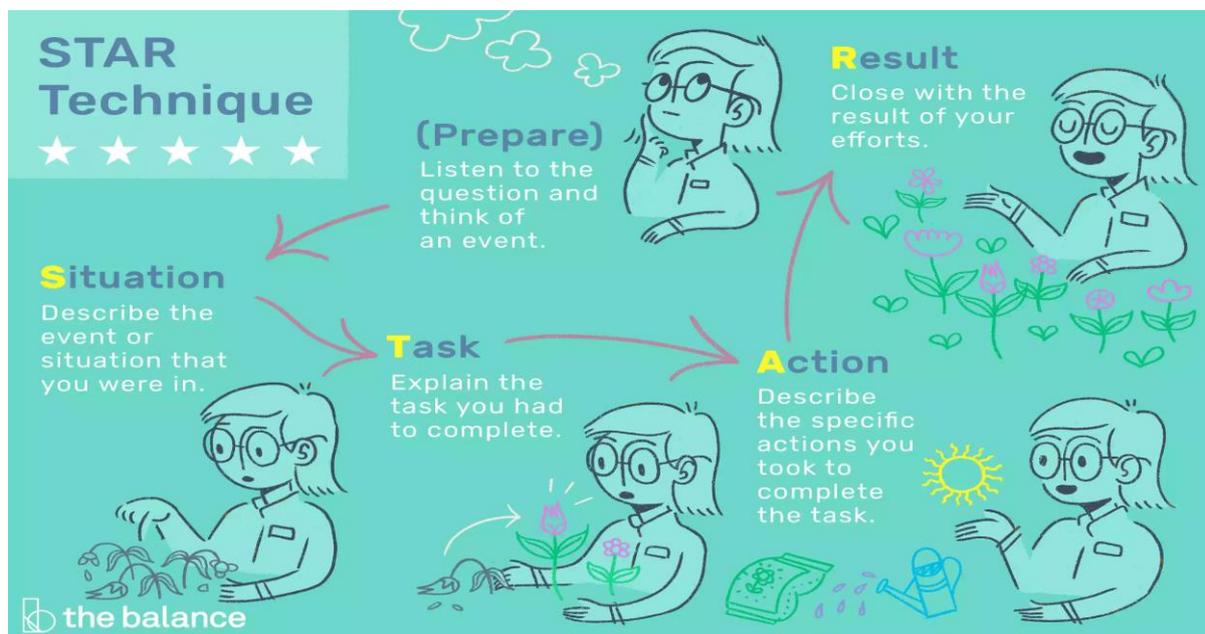
If you are interested in developing your numeracy and literacy skills you may find [these practice tests](#) useful.

### Preparing for success: Your interview with the university and placement/employer

In preparation for the interview, we recommend that you think about the reason why you want to come back to nursing and consider some of the changes that have happened in nursing since you left. Take time to look at some websites – we would recommend the [Nursing and Midwifery Council \(NMC\)](#), the [Royal College of Nursing \(RCN\)](#), and (if applicable) the trust or placement provider you may be interviewed by.

Develop an awareness of issues related to the NHS and your field of practice that are reported in the media. It is also a good idea to identify how you plan to manage the demands of returning to study and practice and to identify some strategies you might want to put in place to ensure you maintain good work and life balance.

As with most NHS interviews, it is likely that you will be asked some competency-based questions, so practice your interview skills, using the STAR technique:



# I have been offered a place on the programme. What happens next?

Whilst every application process varies slightly, the university will usually provide you with a conditional offer in writing and will begin the process of arranging your registration onto the programme. Prior to commencing the programme, the university (or the clinical placement/employer) will undertake occupational health checks, DBS checks and reference checks, and they will provide you with a uniform.

The clinical placement/employer will confirm the placement arrangements with you, such as the start date and proposed shift pattern, and will also ensure a full induction is in place for you.

## Your placement experience

When you start your clinical placement or employment, you will be assigned a practice assessor. They are crucial to your success, and they are chosen for their commitment to helping returning nurses. They'll support you to learn in placement by:

- Working directly with you;
- Identifying learning opportunities;
- Reflecting on your experiences to link theory and practice; and
- Facilitating opportunities to work with other healthcare professionals.

The practice assessor is there to assess and support you with all your skills and the completion of the Practice Assessment Document (PAD). They will also assess your professional approach. In addition, the practice assessor confirms if you are fit to practice safely and if you are suitable for re-entry to the NMC register.

The PAD tends to be an electronic document, which records your activities and experiences. Start this early. Plan each day with a strong focus and discuss it with your mentor or practice assessor, other nurses, or the wider multidisciplinary team at the start of the day. Your PAD must be signed daily for the hours you do.

### Recipe for successful learning

- Seek learning opportunities, ask questions, and show interest.
- Familiarise yourself with digital record-keeping and progress monitoring.
- Build your skills in writing accurate, clear, legible records and documentation.
- Understand and be able to use digital vital signs technology.
- Participate in safeguarding, multi-disciplinary and discharge planning.
- Observe how colleagues manage uncertainty; discuss ways to build your resilience.
- Understand the complexity of patients' needs.
- Familiarise yourself with how to use commonly encountered devices safely.
- Develop your understanding of, and the ability to challenge, discriminatory behaviour.
- Develop your understanding of person-centred holistic care.
- Demonstrate the ability to prioritise patients.
- Observe how your colleagues' communication skills keep patients, families and carers informed.

For further support with any additional study skills, you may find the following resources useful:

<https://www.open.edu/openlearn/skills-for-study>

### What to do if things don't go to plan: don't panic!

There are many reasons why things may not go the way you expected them to. If this is the case, you will be offered support from your university course lead, your practice assessor, and other members of the RtP team. It is important to have early and open conversations with your practice assessor to address any issues. If you are struggling and would like to discuss this with someone outside of your placement, HEE London has a return to practice bureau/network lead for each region of London. Each bureau lead is there to support you through your RtP journey. You may wish to contact your designated bureau lead whose contact details can be found at the end of this document.

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In the meantime, here is some guidance published in an article on [NHS Horizons by Bev Matthews, Clinical Transformation Lead](#), if you are considering returning to practice or currently in the process of returning to practice:

### **Set reasonable expectations for yourself.**

It's ok not to be perfect. You may make mistakes; things will not always go the way you planned, and you can't always give the care you would like. This is life, not you being a bad nurse.

### **Think about the nurse you are now, not the nurse you were before your registration lapsed.**

One of the best things about the return to practice course is the varying experience; there are senior managers in the NHS and people who were unable to take a job when they initially qualified; some have been away for over 20 years, and some only recently have their registration lapsed.

### **Reflect**

Reflection is a wonderful skill and isn't just about being academic or when things go wrong. Part of returning is to know your strengths and address areas to work on and something we should be doing every day not just to pass an exam or part of revalidation.

Developing reflective skills is important in building resilience, job applications and personal relationships, and in identifying that you do something well isn't big headed or arrogant, it is being fair and honest.

### **Be honest**

Whether things are good or bad, it's important to be honest about it as dangerous practice flourishes when we get into a culture of silence.

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If you make a mistake, it is crucial that you acknowledge it, apologise appropriately and honestly, reflect on it (this ensures it remains one mistake, rather than a pattern of behaviour) and then it is likely not to be repeated. Your practice assessor will be able to support you if this happens.

### Find different coping mechanisms to deal with problems.

Sometimes avoidance works really well; however, as a long term strategy and in nursing it is not healthy to avoid problems, hoping that they go away (particularly in relation to academic work).

Try and be pro-active in addressing problems. For example, an honest and tactful conversation with a practice assessor about things that may be concerning you could clear up any issues before they become a bigger issue.

Things aren't always as bad as they feel in your head and sometimes one conversation can help you feel better. Asking for help doesn't mean you are not good enough and demonstrates courage and honesty. How you feel matters so identify your worries and talk them through.

### Finally...

Returning to nursing can be a roller coaster of ups and downs, but there is lots of support to help you navigate through the journey.

## I've successfully completed the programme. What do I do now?

On successful completion of the programme, the university informs the NMC within four weeks that you have successfully completed the programme. Sometimes it takes a few weeks to receive your PIN, but once you receive it, you will either be uplifted to your agreed registered nurse role (if completing a paid/employer-led programme), or if undertaking the voluntary placement programme, you will be able to start applying for vacancies and re-join the NHS workforce as a registered nurse, however we would encourage you to look internally first, to see what opportunities are available within the organisation you completed the clinical placement with.

You may find it useful to take a look at [NHSJobs](#) for current nursing vacancies, or if you are a member of the Royal College of Nursing (RCN), you can access their [Careers Service](#), and use their resources on CV writing, job applications, interview skills, transferable skills, information on different roles within nursing and much more. RCN Careers also offers one to one career coaching over the telephone, should you require it.

## Test of competence

There is another route to regain your registration, called the Test of Competence (ToC). This is a route introduced by NMC which has been effective from January 2020, to improve flexibility and provide an alternative route to re-registration.

For more detailed information about the ToC, please visit [this page](#).

The ToC does not require you to attend a university, or a clinical placement, and could potentially offer a quicker route back to practice. However, this is not the “easy option” back to practice – please do your research to decide whether this is right for you. We would not encourage returners to undertake the ToC without preparation or recent practice-based experience in a supported clinical environment.

The ToC is made up of two parts:

### Part 1: Computer Based Test (CBT)

The multiple-choice computer based theoretical test (known as the CBT) is split into two parts. Part A will cover numeracy and Part B will cover clinical questions for nursing.

Further information about the CBT can be found [here](#)

We would advise you to try out some practice tests [here](#)

Further advice about preparing for the CBT can be found [here](#)

You will be required to undertake your CBT at an approved Pearson VUE test centre. You can search for your local test centre [here](#)

The cost of the CBT at the time of publication: £83.

### Part 2: Objective Structured Clinical Examination (OSCE)

This is a practical test made up of 10 different stations. Four stations will be linked together around a scenario: one station for assessment, planning, implementation, and evaluation, four stations to test skills, and two stations to assess the candidate's values and behaviours and evidence-based practice.

There are three approved OSCE test providers:

- [Oxford Brookes University](#)
- [University of Northampton](#)
- [Ulster University](#)

We would advise you to visit the websites above for further information about the tests and how to prepare and ensure that you choose the most appropriate test provider that you would be willing to travel to.

Further information about the OSCE can be found [here](#)

Cost at the time of publication: £794 (resit fee is £397 if you need to resit 7 or fewer stations)

To book the CBT and the OSCE, you will need to register for this through your [NMC Online Account](#). Once the NMC has confirmed that you can take the ToC, they will provide you with information about how to book and pay for your CBT and OSCE with the relevant test providers.

### Test of Competence funding option 1: Self-funded

With the self-funded option, you will pay for and schedule your own ToC, but HEE will reimburse the ToC fees, on the basis that you can provide evidence of meeting the following criteria:

- Successful Test of Competence pass
- Reside in England
- Provide receipts from Pearson Vue/OSCE Test Centres for CBT and OSCE
- NMC re-registration details
- Provide a current DBS

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- Evidence of a contract of employment as a registered nurse (stating the contracted hours)

For further information about the eligibility criteria and requesting a reimbursement, please contact [returntopractice.wm@hee.nhs.uk](mailto:returntopractice.wm@hee.nhs.uk)

### Test of Competence funding option 2: employer funded

With this option, like the employer-led return to practice route, the employing organisation will advertise either fixed term vacancies, or permanent vacancies for returners who are looking to undertake the ToC to then transition into a permanent registered nursing position following successful completion and reregistration with the NMC. With this option, the returner will undertake a OSCE preparation programme within the employing organisation, so that they are given the best possible chance of success. The employing organisation will fund the returner to undertake the CBT and OSCE and will support the returner to book their tests. If you are looking for employer sponsored opportunities, please search [NHS Jobs](#), or contact your local RtP bureau lead (contact details can be found in the appendix of this document).

With this employer funded option, funding for re-sits is discretionary and based on extenuating circumstances, and any travel expenses to and from test centres will be offered on a case-by-case basis and are agreed at the discretion of the employing organisation.

### Appendix: Glossary

Bursary: non-repayable monetary support designed to assist students to pay for things like clothing, books and other equipment for their course.

CBT: Computer Based Test.

Clinical competencies: skills required to provide safe care to patients, and to accurately assess and critically think through the best options for care using evidence-based practice

Clinical placement: the setting where a returner will undertake practice-based learning.

Competency based interview: questions which aim to find out how someone has used specific skills in their previous experience and how they approach problems, tasks and challenges.

DBS: Disclosure and Barring Service: the organisation that analyses a person's past, looking specifically at any convictions, cautions, reprimands and warnings they may have received. This allows employers to make safer recruitment decisions.

HEE: Health Education England.

Induction: the process for welcoming newly recruited employees and supporting them to adjust to their new roles and working environments.

NHS values-based interview: a recruitment approach which attracts and recruits students, trainees and employees on the basis that their individual values and behaviours align with the values of the NHS Constitution.

NMC: Nursing and Midwifery Council.

OSCE: Objective Structured Clinical Examination.

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**PAD:** Practice Assessment Document. This is the paperwork that will be used by the returner to help develop their professional practice and sign off the competencies required of the programme.

**PIN:** a Personal Identification Number which is assigned by the NMC. The PIN is compulsory for working as a nurse in the UK.

**Placement Provider:** the organisation where the returner will undertake their practice-based learning.

**Practice Assessor:** The individual that assess a student's practice learning for a placement or a series of placements.

**Practice Educators:** The individual that provides support and education to students to improve their professional practice.

**RCN:** Royal College of Nursing.

**RtP:** Return to Practice.

**RtP bureau:** a local team with an individual representative that leads the work with a group of local Trusts and Universities to facilitate access to programmes and placements for returners. There are five RtP bureaus in London for each area of London: South East London, South West London, North Central London, North West London, and North East London. Each bureau has a bureau lead, contact details for each can be found in this appendix.

**STAR technique:** this stands for Situation, Task, Action, Result. Using this strategy is particularly helpful in response to competency-focused questions, which typically start out with phrases such as, "Describe a time when..." and "Share an example of a situation where...."

**Theoretical study days:** classroom-based learning.

**ToC:** Test of Competence. This is an alternative route to return to practice.

# Appendix: Key Contacts

## Bureau Leads

If you require any support with securing a placement or employment for your RtP programme or ToC, please contact your local RtP bureau lead:

- North Central London: Maggie Pratt – [maggiepratt@nhs.net](mailto:maggiepratt@nhs.net)
- North East London: Maria Mantziou – [maria.mantziou@nhs.net](mailto:maria.mantziou@nhs.net)
- North West London: Jinju James (Interim) – [jinju.james@nhs.net](mailto:jinju.james@nhs.net)
- South West London: Siobhan McCawley (Interim) - [siobhanmccawley@nhs.net](mailto:siobhanmccawley@nhs.net)
- South East London: Vivienne Greening (Interim) - [vivienne.greening@gstt.nhs.uk](mailto:vivienne.greening@gstt.nhs.uk)

Your bureau leads will also be available for support throughout your journey back to practice, so please do not hesitate to contact them if you have any questions or need support.

## Health Education England London region contact

You can also contact your regional HEE RtP lead for advice and guidance about anything mentioned in this resource at the following email address: [Returntopractice.london@hee.nhs.uk](mailto:Returntopractice.london@hee.nhs.uk)

## Health Education England regional contacts

If you reside outside of London, and are interested in returning to practice, please contact your regional RTP lead:

Health Education England: South East: [returntopractice.se@hee.nhs.uk](mailto:returntopractice.se@hee.nhs.uk)

Health Education England: South West: [returntopractice.sw@hee.nhs.uk](mailto:returntopractice.sw@hee.nhs.uk)

Health Education England: East of England: [rtp.eoe@hee.nhs.uk](mailto:rtp.eoe@hee.nhs.uk)

## Return to Practice – a guide for returners

Health Education England: North East and Yorkshire: [returntopractice.north@hee.nhs.uk](mailto:returntopractice.north@hee.nhs.uk)

Health Education England: North West: [returntopractice.nw@hee.nhs.uk](mailto:returntopractice.nw@hee.nhs.uk)

Health Education England: Midlands and East: [rtp.mids@hee.nhs.uk](mailto:rtp.mids@hee.nhs.uk)

### University RtP Programme Leads

For further information about the RtP programmes available in London, please contact

- University of Greenwich: Rona Dury and Teresa McMahon: [fehhs-programme-support@greenwich.ac.uk](mailto:fehhs-programme-support@greenwich.ac.uk)
- Kingston & St Georges University of London: Helen Freedman (nursing): [h.freedman@sgul.kingston.ac.uk](mailto:h.freedman@sgul.kingston.ac.uk) and Suzie Martin (general practice nursing): [s.e.martin@sgul.kingston.ac.uk](mailto:s.e.martin@sgul.kingston.ac.uk)
- City University of London: Maria Lynch: [maria.lynch@city.ac.uk](mailto:maria.lynch@city.ac.uk)
- University of Hertfordshire: Leigh Vincent: [l.vincent4@herts.ac.uk](mailto:l.vincent4@herts.ac.uk)

# Appendix: Returner Case Studies

## Unpaid/voluntary placement return to practice case study: meet Kathleen



### **What attracted you to nursing when you first trained?**

It sounds like a cliché, but I really did always want to be a nurse and I couldn't imagine doing anything else!

### **Why did you leave?**

Life had other plans and after ten years of nursing I left to look after my dad who was unwell.

Sadly, after some years my dad died but I wouldn't change my decision or the time I had with him. My children were young and needed me around so to accommodate them I became a Teaching Assistant.

### **Why did you decide to return?**

When my youngest son went to high school, I had more scope to look at other avenues and I returned to the NHS as a Cancer Clinical Navigator which was a supportive role. I adored this job and although some things had changed in the NHS the fundamentals were reassuringly the same. Covid stopped us all in our tracks and once again I had a rethink. I missed being a nurse and I knew with my children growing I had more to give. It was now or never to complete a Return to Practice Course and thankfully I chose now.

### **What were your biggest concerns about returning to nursing?**

My biggest concern was how would I fit it all in and keep the plates spinning. In reality, it worked out much better than I imagined. I worked two days per week in my normal job, two days on placement and I took one day annual leave.

### **What support did you receive?**

I received a bursary towards expenses and my hospital trust also received a payment for supporting me in my placement. My colleagues were very supportive and encouraging. My lecturer was amazing, and the course was pitch perfect for my needs. As a group of returners, we supported each other really well and continue to do so.

### What advice would you give someone thinking of returning?

The hardest part of the process for me was making my decision and establishing myself as a returner on placement. I was the first returner at my placement, so it took a little while to clarify what the expectations were for me as opposed to a nurse undertaking training for the first time. Taking the plunge and completing this course is one of the best decisions I have ever made. Returners have a wealth of experience and wisdom that employers are eager to have. Once a nurse always a nurse: if you think it's right for you, go for it!

### Paid/employer led return to practice case study: meet Mary



#### What attracted you to nursing when you first trained?

I had undertaken a Pre-nursing course at college after my A Levels - biology was a subject I enjoyed, and I wanted to enter a profession where I could help others. I wanted to make a difference in the society I lived in.

#### Why did you leave nursing?

After 10 years, working in acute hospital settings, I felt I needed to try other working opportunities. I was at a stage of my life where I didn't feel the NHS at that time was offering what I needed to be feel fulfilled in my role.

#### Why did you decide to return?

During the height of Covid and lockdown, I wanted to support the NHS, and it felt like the right time to complete the RtP programme.

#### What were your biggest concerns?

The role of IT in health care was my biggest worry as I knew how much computerisation had taken place since I left the NHS. I needn't have worried, as it was very much a normal way of working on the ward and the more you are exposed, the easier it becomes to use.

### What support did you receive?

The support from the RtP Course organiser was great and I gained an employer-led position within a month of my initial contact to City University.

### What advice would you give someone thinking of returning?

I really enjoyed the course and although there were moments when I felt quite challenged, especially on a very busy cardiac ward in one of the most prestigious hospitals in the UK. The long day shifts were very tiring. I also found working full time quite a shock to the system, but I wouldn't have done it without the support of my family. The clinical placement element of the programme of 300+ hours is quite a task to achieve, however at the end of that, I felt like I was truly part of the team and I have established some wonderful relationships. I have personally got so much just by doing the course and I am looking forward to seeing what the future will bring.

### Test of Competence case study: meet Sinead



#### What attracted you to Nursing when you first trained?

When I first trained, I wanted to have a really rewarding job, where I could help people as part of a team, contribute to making a difference to people's lives and feel a sense of achievement throughout my career. I also wanted to travel and see the world and nursing offered lots of opportunities to do that.

#### Why did you leave?

I left nursing when my part time role was assigned to a new full-time nurse, and then whilst not having a job I fell into the role of carer for my mother-in-law, whose health was deteriorating. It wasn't really a planned decision to leave but happened almost accidentally.

#### Why did you decide to return?

My mother-in-law passed away from Covid, and I had joined the temporary register during the pandemic but my mother-in-law's health prevented me from taking up a role. I wanted to return

## Return to Practice – a guide for returners

to feel like I was making a difference and missed being part of a team and having patient interaction.

### **What were your biggest concerns?**

Returning to nursing felt like a daunting process, a university course, unpaid placements, assignments, and what felt like a long period of time to get back on the register. I couldn't see how a return to nursing programme would work for me.

### **What support did you receive?**

I was supported and guided through the process by Maggie Pratt, the Return to Practice Lead in North Central London, and had this simpler process of the Test of Competence explained and facilitated by the Royal Free. I prepared for the CBT myself but had a 2-week OSCE preparation course and several practical sessions which were invaluable prior to that exam. The support is ongoing in trying to help me find the ideal fit for my previous experience, I can't imagine how difficult this process would be trying to do it by yourself!

### **What advice would you give someone thinking of returning?**

I would say seek support! This process can be simplified and if you are supported and guided by the right people getting back to a career you love can be faster and a lot easier than you might imagine. Nursing offers so many different roles and such varied career opportunities you can be back doing a job you love in a short space of time, stop thinking about it and get the process started!!

## Appendix: Authors and Acknowledgements

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## Appendix: References

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