

Return to practice – a guide for returners

For returning nurses and midwives across the south east
region – April 2022



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Introduction to Return to Practice

The Return to Practice (RtP) programmes for nurses and midwives are supported by Health Education England (HEE), who recognises that supporting experienced nurses and midwives 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 or midwife as quickly as possible.

Undertaking the RtP programme can feel like a daunting prospect, when you have been away from nursing or midwifery 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 South East RtP team, your university and your practice educators 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, including 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 or midwifery role.

How is the programme funded?

HEE South East will pay for the tuition/university fees associated with the programme and will also provide you with a bursary to cover any out-of-pocket expenses (should you not

be supported by an employing organisation), such as book costs, travel, and childcare, depending on the route you choose to return.

Funding for tuition fees is paid by HEE South East directly to your chosen university, and the bursary is either paid to the university or to the organisation supporting your placement, who then manages the transfer of the bursary to you. If you are employed in a healthcare role and being released to attend the Return to Practice course, you do not normally qualify for the bursary

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 and placement hours. The length of time required to complete the programme will be established during an interview and further discussion you have with your university and the placement provider.

The Return to Practice programmes in the South East region

The programme varies for each university, but as a standard, all programmes consist of theoretical study days at the university which can be face to face, online, or a mixture of the two (blended learning) 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 and midwifery:

- Adult Nursing
- Child Nursing
- Mental Health Nursing

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- Learning Disability Nursing
- Specialist Community Public Health Nursing (this includes school nursing, health visitors, occupational health nursing, and family health nursing)
- Midwifery

There are six universities that offer the RtP nursing programme in the South East:

University of Brighton

For further information about the programme offered at the University of Brighton, please visit [this page](#) or contact: [Gloria Whittaker](#) @ G.Whittaker@brighton.ac.uk

University of Hertfordshire

For further information about the programme offered at the University of Hertfordshire, please visit [this page](#) or contact: [Yvette Boamah](#) @ y.boamah@herts.ac.uk

University of Greenwich

For further information about the programme offered at the University of Greenwich, please visit [this page](#) or contact: [Teresa McMahon or Rona Dury](#) @ fehhs-programme-support@greenwich.ac.uk

Canterbury Christ Church University

For further information about the programme offered at Canterbury Christ Church University, please visit [this page](#) or contact: [Kate Devis](#) @ kate.devis@canterbury.ac.uk

University of Northampton

For further information about the programme offered at the University of Northampton, please visit [this page](#) or contact: [Ros Wray](#) @ ros.wray@northampton.ac.uk

Bournemouth University

For further information about the programme offered at Bournemouth University, please visit [this page](#) or contact: [Return to Nursing](#) @ Details-returnednursing@bournemouth.ac.uk

There are a number of options to offer return to midwifery in the South east:

University of Greenwich (Midwifery)

For further information about the programme offered at the University of Greenwich, please visit [this page](#) or contact: [Kate Pearce](#) @ fehhs-programme-support@greenwich.ac.uk

University of Plymouth (Online) (Midwifery)

For further information about the programme offered at University of Plymouth, please visit [this page](#) or contact: [Adele Kane](#) @ adele.kane@plymouth.ac.uk

There may be alternative university courses to explore, so feel free to discuss with the South East regional RtP lead or see other courses available across the country – [NHS Health Careers Course Finder](#)

Routes for returning to practice

You can undertake the programme either as a paid permanent employee of a trust (should a vacancy be available for this option, and the organisation support this route), or through a voluntary, unpaid, time specific placement organised by the university.

Option 1: Unpaid/Voluntary placement route

With the voluntary 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 South East. 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 dependents, families, or other employment.

When your university has supported/guided 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 local 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 confirm their own placement by signposting the returner directly to specific trusts or local organisations.

Step 3: The university may require the returner to undertake a literacy and numeracy assessment in some form. If further support is required, the returner may be signposted to further support for literacy, numeracy and digital skills. Here are some good resources:

<https://www.bbc.co.uk/teach/skillswise>

For further support with any additional study skills, you may find the following resources useful: <https://www.open.edu/openlearn/skills-for-study>

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. This is likely to be online currently.

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Step 5: If the returner is successful at the interview they are 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 [NHS Jobs](#) 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, recruitment process and specific requirements involved with this route. There are several resources to support you to write an application.

- Writing your application form: https://www.jobs.nhs.uk/advice/write_appform.html
- General advice on completing an application form: https://www.jobs.nhs.uk/help/appformhelp_1.html
- Making a successful application: https://www.jobs.nhs.uk/advice/success_applics.html

If your application is accepted, you will usually be invited to a joint interview with the employing trust/organisation 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/Support Worker 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 or Midwife position as appropriate. 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/Support Worker. 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 or midwifery role secured upon successful completion of the programme. You will also have protected time to attend any required university study days and training.

Paid/Employer-led application, recruitment, and selection process

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 [NHS Jobs](#) or trust website. Do check NHS Jobs on a regular basis for these adverts and set up any notifications.

Step 2: If the returner's application is successful, they will be invited to an NHS values-based interview likely to be with both the university and the trust.

Step 3: If successful 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 interview?

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 you want to come back to nursing/midwifery and consider some of the changes that have happened

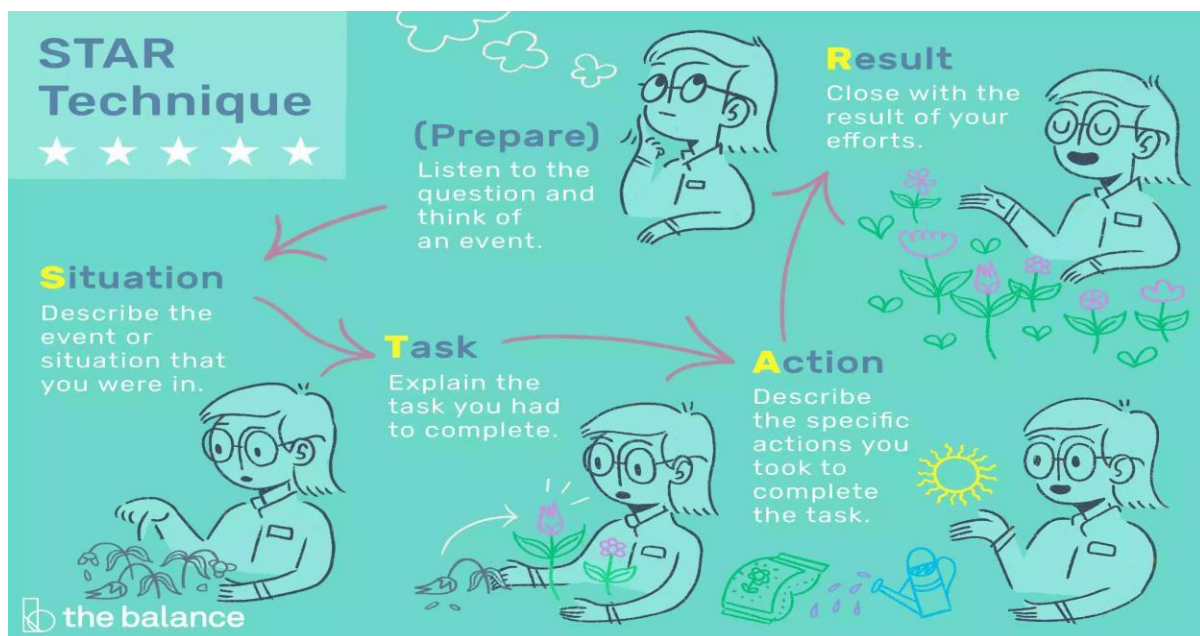
since you left.

Take time to look at some websites – we would recommend the [Nursing and Midwifery Council \(NMC\)](#), the [Royal College of Nursing \(RCN\)](#), [Royal College of Midwives \(RCM\)](#) 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.

Values – Some questions you may be asked could be values based which you cannot prepare for necessarily but maybe worth visiting [The NHS Values web page](#).

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 experiences

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/midwives. 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 maybe a paper or electronic document, which records your activities and experiences. Start this early. Plan each day with a strong focus and discuss it with your practice assessor, other nurses/midwives, 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.

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- 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-centered holistic care.
- Demonstrate the ability to prioritise patients.
- Observe how your colleagues' communication skills keep patients, families and carers informed.

What to do if things don't go to plan:

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.

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:

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. 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 supervisor and assessor will be able to support you if this happens.

Find different coping mechanisms to deal with problems.

Sometimes avoidance works well; however, as a long-term strategy and in nursing/midwifery 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 supervisor/ assessor about things that may be concerning you could clear up any issues before they become a bigger issue.

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

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.

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

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- 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 two approved OSCE test providers based in the South East:

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

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 (re-sit fee is £397 if you need to re-sit 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
- 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

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 or midwifery 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](#).

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.

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OSCE: Objective Structured Clinical Examination.

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.

RtP: Return to Practice.

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....."

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

Appendix: Key Contacts

Health Education England South East region contact: Claire Wardle

You can contact your regional HEE RtP lead for advice and guidance about anything mentioned in this resource at the following email address: returntopractice.se@hee.nhs.uk and Telephone: 01865 932097

Health Education England regional contacts

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

- Health Education England: South West: returntopractice.sw@hee.nhs.uk
- Health Education England: East of England: rtp.eoe@hee.nhs.uk
- Health Education England: London: Returntopractice.london@hee.nhs.uk
- Health Education England: North East and Yorkshire: returntopractice.north@hee.nhs.uk
- Health Education England: North West: returntopractice.nw@hee.nhs.uk
- Health Education England: Midlands and East: rtp.mids@hee.nhs.uk

Appendix: Returner Case Studies

Unpaid/voluntary placement return to practice case studies:

Return to Practice Midwifery – hear from Sarah who has returned to midwifery.



What attracted you to midwifery when you first trained?

When I was child if anyone asked me what I wanted to do when I grow up, I would always answer “a doctor.” As I got older and more aware of female health issues and childbirth, I was sure I wanted to be a midwife and help women and their families during this special time.

Why did you leave?

After having my first child I returned to work for a short period, but childcare was difficult, and it became clear that my first born had some difficulties.

Why did you decide to return? How long had you been off the register?

I ended up off the register for nine years, in that time I completed my family and it transpired that all of the children (3) have special educational needs and disabilities. Due to this I had no intention of returning and believing that a return would be possible with my current family circumstances. The children settled into new schools and had more support and suddenly I had a little more free time so decided to make some enquiries into enrolling on a return to midwifery practice course.

What were your biggest concerns or challenges? What support did you receive?

The biggest concern about starting the course was how I would manage the hours/studying and long days, knowing that this change would be particularly stressful for the children. Working 12-hour shifts meant that I wouldn't see them at all that day. However, the course was very flexible, and I was advised as long as it was completed within a year that would be fine. I decided to work 22 hours a week, which was manageable for me. The trust were also flexible with off duty, as I preferred not to work two long days together due to the children and this was normally always accommodated.

The trusts practice facilitator worked with me to ensure that I got the experience in the areas that I needed it. I found the maternity unit a friendly place to work which helped me to regain my confidence after so long away from midwifery.

What advice would you give someone thinking of returning?

Go for it! It wasn't as daunting as I had expected it to be and was very manageable. Naturally, it's always a big step to go back to midwifery which is a fast paced and at times challenging career, but the return to practice course I feel has prepared me for life as a registered midwife once more.

Return to Practice Nursing - hear from Emma who returned to Learning Disabilities Nursing



What attracted you to midwifery when you first trained?

I successfully completed my Pre - Registration Learning Disabilities Nursing programme in 2004 and was employed as a community Nurse for 9 years in a joint health and social care team.

Why did you leave?

Whilst I continued to thrive as a Community Nurse: personal events resulted in an episode in 2014 of Depression and Anxiety, resulting in me resigning my position.

In 2020 I saw the loss of my dear father who had end stage renal failure and I had been his main carer from 2017. It was being able to cope with the emotional loss of my dad that reminded me how resilient and determined I am, and my passion in enabling individuals to achieve their maximum potential regarding their health.

Why did you decide to return?

All the above gave me the confidence to apply for the return to practice course, although I was concerned that my previous illness would be a barrier.

The Health Educational England (HEE) website made it easy to establish the pathway in accessing a return to practice course in my area. I applied to the University of Bedfordshire and was successful, relieving the concerns I stated above.

What were your biggest concerns or challenges? What support did you receive?

At the start of the course, I was apprehensive regarding the academic standard and going on practice placement but found that both the lecturers and my practice assessor in the Community Team for Adults with Learning Disabilities (CTALD) were extremely supportive and reassuring, making the course an enjoyable experience. I would advise any individual who is going to undertake the return to practice course to utilise these support networks.

Directly from the completion of the return to practice course I have commenced as a band 4 within the CTALD in Milton Keynes, whilst I await my Nursing and Midwifery Council (NMC) registration when I will return as a band 6 Community Nurse. Personally, I cannot thank HEE, the University and the CTALD enough for enabling me to return to the nursing profession that I love, and I am so happy to be back!!!

Appendix: References

Article: *Return to Practice, it may be tough but it's worth it*

<https://nhshorizons.passle.net/post/102fokb/return-to-practice-it-may-be-tough-but-its-worth-it>

Leaflet: Capital Nurse: *Thinking of returning to Nursing?*

<https://www.whittington.nhs.uk/document.ashx?id=13012>

Article: *How to Use the STAR Interview Response Method*

<https://www.thebalancecareers.com/what-is-the-star-interview-response-technique-2061629>