

## Professional Registration

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Name of responsible committee/individual:	Employment Policy Group/JCNC
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## **Professional Registration Policy Statement**

<b>Background</b>	This policy has been developed from the NHS Employment Check Standards to ensure that Lincolnshire Community Health Services NHS Trust is fully compliant with the standards, and to reduce the risk of harm or damage to patients. The purpose of this policy is to implement a coordinated and uniform approach to Professional Registrations, qualification checks and alerts.
<b>Statement</b>	This policy is intended to provide an overview for Professional Registrations and Membership processes and procedures included within the remit of the Workforce Services Team. It sets out responsibilities for Workforce and Transformation together with managers and staff within Lincolnshire Community Health Services NHS Trust in relation to registrations and certification and NHS Employment Standards.
<b>Responsibilities</b>	Compliance with the policy will be the responsibility of all staff.
<b>Training</b>	Directors/General Managers are responsible for making all employees aware of the process to be followed.
<b>Dissemination</b>	Website & Intranet
<b>Equality</b>	This policy aims to meet the requirements of the Equality Act 2010 and ensure that no employee receives less favourable treatment on the grounds of gender, sexual orientation, transgender, civil partnership/marital status, appearance, race, nationality, ethnic or national origins, religion/belief or no religion/belief, disability, age, carer, pregnancy or maternity, social status or trade union membership
<b>Resource implication</b>	The policy has been developed in line with the NHS Employers NHS Employment Check Standards, to provide a framework for staff within the organisation to ensure appropriate actions are taken

## Professional Registration Policy

### Version Control Sheet

Version	Section/Para/ Appendix	Version/Description of Amendments	Date	Author/ Amended by
1		Professional Registration and Validation Policy	April 2007	Sheila Manning, HR Manager
2	Policy title	Title changed from above to Professional Registration Policy. Inserted template, version control sheet and Policy Statement in line with Policy on Policies 2008.	November 2008	John Watkinson
2.2	Whole document	Revised in accordance with legislative requirements.		
3	Whole Document	Reviewed in accordance with new processes/procedures	June 2010	Claire Chapman
3.1	Whole Document	Policy realigned following implementation of the Transforming Community Services agenda and new legal entity	March 2011	Rachael Ellis-Ingamells
3.2	Whole Document	Changes made to policy in line with new ways of working in HR operations Team	December 2011	Rita Ahmet
3.3	Front Page	Change from HR023 to P_HR_08		
4.0	Whole Document	General Review of Policy	February 2013	Julie Bembridge
5.0	Whole document	General review of policy including requirements for maintaining professional membership for relevant non clinical staff.	December 2014	Margaret Raw
5.1	Section 5 and Equality Analysis	Updating of policy to include nurse revalidation – minor amendment approved EPG Jan 16	December 2015	Kerry Swift
6	Whole document	Updating alerts process and revalidation.	January 2017	Emily Jarvis

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# **Lincolnshire Community Health Services NHS Trust**

## **Professional Registration Policy**

### **1. Introduction**

Lincolnshire Community Health Services NHS Trust (LCHS) recognises and accepts its responsibilities to provide good standards of care and treatment to patients, by fully qualified, statutory registered professional practitioners.

Professional regulation is intended to protect the public, making sure that those who practice a health profession are doing so safely and those employed in non-clinical roles in a professional capacity maintain good practice and adhere to standards of professional behavior. Employers must check the registration/membership of relevant staff with the relevant regulatory body, as well as ensuring that they have the right qualifications to do the job.

Where a check has been made by the relevant regulatory body it should not be necessary to verify qualifications separately. Employers must have the consent of the individual and their registration number in order to check the registration.

It is a 'contractual condition subsequent' that the individual has appropriate registration/membership throughout their employment. In the event that an individual has no registration/membership, this will be classed as a breach of contract and the employment will have been deemed to have ended by operation of the law.

From July 2014 all health care professionals must hold an appropriate indemnity arrangement in order to practice and provide care. Healthcare professionals who are employed by LCHS or engaged through Zero Hours Contracts will have the appropriate indemnity cover provided they are undertaking tasks and duties that are required for the role in which they are employed.

### **2. Scope**

The NHS Employers – NHS Employment Check Standards are mandatory for all applicants for NHS positions (prospective employees) and staff in ongoing NHS employment. This includes permanent staff, staff on fixed-term contracts, temporary staff (including bank staff), volunteers, students, trainees, contractors and highly mobile staff supplied by an agency.

Before an NHS organisation appoints any health professional they must always check the following three areas:

- That the applicant is registered to carry out the proposed role
- Whether the registration is subject to any current restrictions which might affect the duties proposed
- If the applicant has investigations against them about their fitness to practice that the regulatory body has a duty to disclose

In addition to this, NHS organisations must also complete checks in relation to DBS information (covered in the Disclosure and Barring Service Policy and Protocols), health clearance, references, right to work and verification of identity (covered in the Recruitment & Selection Toolkit).

There are a number of professional and regulatory bodies covering the health professions, the main ones being identified in Appendix 1. Each regulatory body has different procedures for disclosing fitness to practice information, their four main functions are:

- a. Establishing standards of competence, ethics and conduct
- b. Establishing standards for training
- c. Keeping a register of those who meet the standards
- d. Dealing with registrants who fall short (e.g. by placing conditions on their registration or removing them from the register)

This policy applies to all job roles where professional registration or membership of a professional body is a requirement of the job role.

In addition to the requirements for health professions, there are also a number of roles within the Corporate services, including but not limited to HR, finance, etc. where membership of a Professional Body is a requirement of the job role.

### **3. Pre-Employment Checks**

Registration checks are done at three different stages of the recruitment process:

Prior to an individual's interview, the Workforce Services Team will check and confirm registration with the relevant professional body via the relevant website e.g. NMC, GMC, HCPC, etc. in addition to the HPAN website for alerts.

The Workforce Services Team will inform the appropriate manager at this stage if the individual is not registered to carry out the proposed role, the registration is subject to any current restrictions which might affect the duties proposed or if the applicant has investigations against them about their fitness to practice that the regulatory body has a duty to disclose.

When invited to interview candidates are required to attend with their original evidence of professional registrations/memberships, relevant to the post. At interview the appointing manager is responsible for ensuring that this documentation is current and appropriate for the role, checked, copied and verified during the interview process. Copies must be signed by the appointing manager and dated as verification of a true copy of the original, then forwarded to the Workforce Services Team, along with the interview summary form.

When invited for interview GPs will be required to confirm they are on a Primary Medical Performers List of a Primary Care Organisation within England. It is the responsibility of the Appointing Officer to liaise with Practitioner Services to confirm that the GP is listed prior to an offer of employment being made.

When invited for interview medical staff will be required to provide a report from their most recent Responsible Officer that confirms their compliance with medical appraisal and revalidation.

Registration of the preferred candidate is checked again with the appropriate professional body on the relevant website by the Workforce Services Team and compliance confirmed to the appointing manager prior to an offer of employment being made.

An offer may be withdrawn at any time prior to commencement of the post should registration not be successfully reconfirmed at any stage of the process. Examples include the interview paperwork of an overseas applicant needing to equate their professional registration with the UK Regulating Body, someone who is subject to investigation with a professional body and is subject to interim conditions or suspended, or an individual erased from the register, or a student who is offered employment subject to passing examinations and then fails to qualify.

New employees to the trust are required to attend a pre-appointment check appointment with a member of the Workforce Services Team to complete essential documentation. Relevant original registration and qualification documents are again checked, confirmed, scanned and placed on the employee's personal file.

#### 4. Practitioner Services

LCCHS will liaise with the relevant Practitioner Services Authority, who are responsible for ensuring qualification and registration checks of Independent Contractors, in respect of the recruitment and ongoing validation of Doctors working within LCCHS Trust services.

#### 5. Annual Checks and Revalidation

As per the NHS Agenda for Change Terms and Conditions of Employment Contract, section 23;

“The continuation of your employment is conditional upon you continuing to be registered with the appropriate professional body. We will require evidence of current registration.”

As per the NHS Terms and Conditions of Employment for Salaried GP's Contract, section 9;

“Failure to maintain such registration, including suspension or erasure from either register and the imposition of conditions upon registration, may, subject to proper investigation and procedure, entitle the employer to terminate the contract of employment.”

Nurses and Midwives are required to apply for revalidation and submit the required evidence to the NMC every three years. They are required to submit the necessary evidence in the 60 days up to their renewal date. Line managers will be notified by Workforce Services one year in advance of their Revalidation date, in order that they can support staff to undertake the required process. The Nursing and Midwifery Council provide guidance on exceptional circumstances, where nurses and midwives believe they are unable to provide sufficient evidence to revalidate. Evidence should be collated over a three year period and therefore this will be taken into consideration, when exceptional circumstances are requested.

In the event of a registrant reporting long term absence including sickness, career break, maternity leave etc; the employee remains contractually bound by terms and conditions of service whilst on leave from their employment. Therefore it is crucial that the member of staff ensures that their registration is maintained throughout this period. Failure to do so will lead to a reduction in salary as outlined in the paragraph below and may be seen as a breach of their contract of employment which is likely to lead to more formal action being taken under the organisation's Disciplinary Policy.

All employees requiring professional registration for their employment with the Trust are expected to be responsible for their own registration renewal, on time.

Where evidence of the appropriate registration is absent an individual **may not** conduct any duties that require them to be professionally registered. In such an event immediate action must be taken by the line manager in liaison with their SHRBP and notified to the Director of Workforce and Transformation (or designated representative) and/or the appropriate Director (or designated representative). Any action taken must be reasonable and proportionate to ensure patient and employee safety.

Where employees are unable to practice while awaiting confirmation of renewal of the appropriate registration, salary received will either be commensurate with them being employed as a non-registered

member of staff or on no pay. This will continue until

the Trust receives satisfactory evidence of their re-registration.

In relation to revalidation, where employees have failed to revalidate and are therefore unable to practice, the member of staff will not be paid and this will be dealt with through a formal disciplinary route, unless exceptional circumstances are evidenced and accepted by the relevant professional body.

## **6. Receiving Alerts / Fraud Notices**

On receipt of any alert/fraud notices or other correspondence from the GMC, NMC or, HCPC in line with Healthcare Professionals Alert Notices Directions 2006 (regarding registered health professionals whose performance or conduct could pose a significant risk of harm to patients, staff or the public), Workforce Services will check the details to identify any members of LCHS staff and notify the Medical Director and Director of Workforce and Transformation (or nominated deputy) immediately of any concerns.

Any concerns regarding clinical performance which may affect a member of staff's registration will be managed in line with LCHS policy, for example, Managing Employee Performance & Capability, Disciplinary Policy and Procedure incorporating Investigation Process, Risk Management Strategy and in liaison with the National Clinical Assessment Service (NCAS) guidance where appropriate.

## **7. Application to Request the issue of an Alert**

An alert letter is part of the wider NHS clinical governance and quality strategy for the protection of patients and staff which is aimed at managing risk posed by individual practitioners working in the NHS. Before an 'Alert' is issued there are a range of local policies and procedures that will be followed.

Where it becomes clear that the performance of an individual is not reaching the required standard, the line manager must meet with them to discuss the matter at the earliest opportunity. This meeting is to ascertain any reasons for the problem in order to determine the appropriate course of action.

A range of HR Policies are available to support this process as listed in section 9. Complex cases may require the support of the SHRBP and input from Practitioner Performance. Professional body referral may also be appropriate at this stage.

Where an employee is unable to reach the required standard and all options have been pursued, and there remain concerns that an individual's performance or conduct could place patients or staff at serious risk and/or it is believed that the individual is likely to be working or seeking work elsewhere in a health or social care setting, a referral to the relevant professional body will be made (if not already done) and an application to request issue of an alert will be made in line with the National Clinical Assessment Service (NCAS) guidance on raising an Health Professional Alert Notice (HPAN) on

<http://www.ncas.nhs.uk/about-ncas/alert-notices/requests-to-issue-an-hpan/>

The matter will also be notified and managed as a Serious Incident in line with LCHS Risk Management Policy.

## 8. Monitoring of Professional Registration

The table below highlights how the checking of professional registrations will be monitored by Lincolnshire Community Health Services NHS Trust. Failure to comply with the policy, including near misses, attempts from individuals to gain employment without the appropriate registration and registration renewal failures will be reported in line with the LCHS Incident Reporting Policy.

Minimum requirement to be monitored	Process for monitoring e.g. audit	Responsible individuals/group/committee	Frequency of monitoring/audit	Responsible individuals/group/committee (multidisciplinary) for review of results	Responsible individuals/group/committee for development of action	Responsible individuals/group/committee for monitoring of action plan
Number of staff without valid professional registration. What has happened with those staff without professional registration	ESR Reports. Regular auditing	Workforce Services Team	Annual Report Monthly	Operational Programme Development Board	HR	Operational Programme Development Board

## 9. Related Policies

This Policy should be cross-referenced with the following policies in the organisation:-

Recruitment & Selection Policy  
 Managing Employee Performance & Capability Policy  
 Risk Management Strategy Policy  
 Your Behaviour Matters- Disciplinary Policy & Procedure Incorporating Investigation Process  
 Temporary Staffing Policy  
 Return to Practice Policy

## Appendix 1

### PROFESSIONAL AND REGULATORY BODIES

<b>Profession</b>	<b>Statutory Body</b>
Medical	General Medical Council (GMC)
Nursing & Midwifery	Nursing and Midwifery Council (NMC)
Pharmacists	Royal Pharmaceutical Society of Great Britain (RPSGB)
AHP's and others	Health and Care Professionals Council (HCPC)
HR	CIPD

**This list is not exhaustive and may be amended from time to time.**

## Appendix 2

# Equality Analysis

## Introduction

The general equality duty that is set out in the Equality Act 2010 requires public authorities, in the exercise of their functions, to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

The general equality duty does not specify how public authorities should analyse the effect of their existing and new policies and practices on equality, but doing so is an important part of complying with the general equality duty. It is up to each organisation to choose the most effective approach for them. This standard template is designed to help LCHS staff members to comply with the general duty.

Please complete the template by following the instructions in each box. Should you have any queries or suggestions on this template, please contact the Equality and Human Rights Lead.

### **Name of Policy/Procedure/Function\***

PROFESSIONAL REGISTRATION POLICY

**Equality Analysis Carried out by:** Emily Jarvis

**Date:** January 2017

**Equality & Human rights Lead:** Rachel Higgins

**Director\General Manager:** Maz Fosh

**\*In this template the term policy\service is used as shorthand for what needs to be analysed. Policy\Service needs to be understood broadly to embrace the full range of policies, practices, activities and decisions: essentially everything we do, whether it is formally written down or whether it is informal custom and practice. This includes existing policies and any new policies under development.**

## Section 1 – To be completed for all policies

A.	Briefly give an outline of the key objectives of the policy; what it's intended outcome is and who the intended beneficiaries are expected to be	The policy aims to provide clear information in relation to the responsibilities for individuals in relation to their professional registration and what processes will be followed to monitor this.		
B.	Does the policy have an impact on patients, carers or staff, or the wider community that we have links with? <b>Please give details</b>	The policy impacts on staff within LCHS who are required to maintain professional registration in order to undertake their role.		
C.	Is there any evidence that the policy/service relates to an area with known inequalities? <b>Please give details</b>	No known equalities.		
D.	Will/Does the implementation of the policy/service result in different impacts for protected?	No		
		Yes	No	
	Disability		X	
	Sexual Orientation		X	
	Sex		X	
	Gender Reassignment		X	
	Race		X	
	Marriage/Civil Partnership		X	
	Maternity/Pregnancy		X	
	Age		X	
	Religion or Belief		X	
	Carers		X	
<p><b>If you have answered 'Yes' to any of the questions then you are required to carry out a full Equality Analysis – please go to section 2</b></p>				
<p>The above named policy has been considered and does not require a full equality analysis</p>				
<b>Equality Analysis Carried out by:</b>		Emily Jarvis		
<b>Date:</b>		January 2017		