

Professional Registration Policy

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Professional Registration Policy

Executive Summary

This policy applies to all staff irrespective of their Age, Disability, Gender reassignment, Marriage and Civil partnership, Pregnancy and Maternity, Race, Religion and Belief, Sex and Sexual orientation.

This document sets out Leeds Community Healthcare NHS Trust's (LCH) standard Professional Registration policy and procedures.

This policy applies to staff employed permanently, staff on fixed-term contracts, temporary and bank staff, doctors in training, volunteers, students, trainees, contractors, persons holding honorary agreements and highly mobile staff employed through an agency.

This policy has been drafted to comply with statutory requirements and following professional body guidance and must be read together with other relevant Trust policies, procedures and local guidance.

The Policy may be reviewed at the request of Management or Staff Side by giving four weeks' written notice with reasons for the review.

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1 Introduction

Leeds Community Healthcare NHS Trust (LCH) recognises its legal duty of care to provide a safe and secure environment for all employees, patients and visitors as well as delivering quality care and treatment to patients. It is LCH responsibility to ensure all qualified staff within the organisation adhere to the requirements of their Professional Bodies and maintain registration.

This policy supersedes all other relevant policies under previous terms and conditions of employment held by individuals who have transferred into the Trust from other NHS organisations, and who are required to be registered with a professional body in order to be able to practice.

2 Aims and Objectives

This policy will set out the process for ensuring that professionally qualified staff employed by Leeds Community Healthcare NHS trust are competent to undertake the role as outlined by their professional body. This policy does not apply to pre employment checks please reference the recruitment and selection policy and toolkits for new employees.

It is a legal requirement that the employment of professional staff is limited to those whose names are included in the register maintained by the relevant regulatory body. The employment of unregistered staff jeopardises protection to which the public are entitled. The confirmation of an employee's registration status forms a vital part of this public protection.

LCH recognises that continued professional development is a shared responsibility. All regulated professions have a duty to maintain their knowledge and ensure their competency as part of their respective code of conduct. It is the individual's responsibility to maintain their professional registration.

The Trust regards verification of confirmation of registration with the appropriate professional body as a vital component of the required standards when commencing employment and also in continuing to practice in subsequent years.

When employing agency staff this must be coordinated through Clinical and Support Services (CLaSS) and any external agencies used must be from an approved agency nursing – CPC (Commercial Procurement Collaborative) or GPS (Government Procurement service). This provides the Trust with assurance that employment and registration compliance have been undertaken and agencies are regularly monitored and audited to ensure the workers compliance is maintained. More detail on the framework, audit and checking process for the CPC Framework can be found at www.noecpc.nhs.uk

3 Definition

Registration as a professional shows the level of competency an individual has achieved. It also demonstrates their fitness to practise, commitment to upholding the highest standards and to building on, maintaining and refreshing knowledge and skills during their career.

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Nurse registration; is a function of the Nursing and Midwifery Council for Nursing, Health Visiting and Midwifery (NMC) who renew registrations every 3 years but staff have to pay an annual retention fee.

Registration of doctors; is a function of the General Medical Council (GMC) which is responsible for renewing the registration of doctors every year.

Registration of dentists; is a function of the General Dental Council (GDC) which is responsible for renewing the registration of dentists every year. Registration will be compulsory for dental nurses and dental technicians from July 2008.

Health and Care Professions Council (HCPC), formally, HPC & CPSM; registers Allied Health Professionals every two years.

Registration of Pharmacists; is a function of the General Pharmaceutical Council who renews registrations every year. Registration will be compulsory for pharmacy technicians from 2010

4 Responsibilities

All staff employed by LCH must work in concordance with the Leeds Safeguarding Multi-agency Policies and Procedures and local guidelines in relation to any safeguarding concerns they have for children or adults they are in contact with.

Chief Executive will ensure that LCH has robust policies and procedures in place for maintaining professional registration. In practice this responsibility is delegated to Heads of Service and Operational Managers.

Director responsible for Workforce is responsible for ensuring that staff who are professionally registered are fit to practise through maintaining their professional registration, thereby ensuring the safety of patients, users and others who are treated by professionally registered employees.

Quality, Governance and Risk Committee

The Quality, Governance and Risk Committee is responsible for seeking assurances that professional registration checks are being conducted and where there are lapses, there is a process in place for follow up and take action. Assurance is achieved through the review of 6 monthly reports from Workforce and review of the annual audit.

Professional Bodies and Trade Union organisations accept the responsibility of working together on issues in good faith and with goodwill with the shared intention of facilitating good working relations.

Workforce will work in partnership with Managers and Employee Representatives to ensure employees are treated fairly and consistently within the framework of the policy.

They will advise managers of options available should an employee be managed under this policy.

Workforce Information will maintain the Electronic staff record including professional registration details through checks taken on appointment and thereafter

Workforce Information is responsible for monitoring and managing the process for checking professional clinical registration and for maintaining up to date records of the

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status for all existing registered clinical professional staff on ESR, including registration number and expiry date. These details are validated with the relevant professional body websites. Either a copy of the card or details from the professional body website is retained in the staff members personnel file

For all new clinical employees to the Trust recruitment will cross check the professional registration details received during the interview and selection process with the relevant professional body website; to ensure that registration status is valid, prior to a staff member commencing employment. These checks are also part of the information governance and assurance standards linked to the use of the NHS Care Record Service (NHS CRS). The outcome of pre-employment checks will be recorded on the Electronic Staff Record (ESR). For further detail please refer to the Trust's Pre-employment Checks Policy.

The Trust will carry out all checks in compliance with the Data Protection Act 1998 and the Equality Act 2010. Information should only be obtained where it is essential to the recruitment decision and kept in accordance with the Act.

The Workforce team review on a monthly basis an ESR Professional Registration Report to identify any up-coming renewal dates prior to expiry including those staff on honorary contracts.

Line Managers are required to manage and act fairly and consistently. Management is responsible for ensuring that this policy is disseminated effectively and observed by all relevant employees.

- Managers have a responsibility to ensure that the registration of all professional clinical staff in their area is current and act in an appropriate manner when a lapse is received.
- Where a registration has lapsed, the manager will establish the reasons why. It is the responsibility of the line manager in consultation with their HR Manager, to take prompt action to protect the interests of the public, patients and other staff.
- Employees must be suspended with immediate effect if registration is not renewed and the manager must complete an SW2 to notify payroll of the suspension and that it is without pay. There are no alternatives to suspension available.
- Managers must ensure that registration is checked for employees returning from maternity or other long term absences, e.g. sickness, secondment, employment break.
- As part of the recruitment and selection process the manager ensures that where professional registration is an essential requirement, the application form is checked for current registration details including registration number and expiry date. In the event of unsatisfactory registration checks being received prior to employment, the Recruiting Manager will be informed, enabling them to make a full review of the facts and circumstances and make a decision to recruit or withdraw the job offer
- When staff are seconded into the Trust, their employer remains the organisation with whom they have a substantive contract. However, the Trust will, as a good employer, check the registration via the appropriate Website.

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Staff have a duty to comply with Trust policies and procedures. If an employee has any questions or concerns about these they must raise these with their line manager and/or the Human Resources Department

- A Registered Professional wishing to practise within their appropriate field must maintain their registration throughout their employment within the Trust.
- It is the duty of the individual to organise and pay the registration fee within the requested time limit and in line with renewal dates. (See Appendix 1)
- The GMC allows a period of 56 days beyond the re-registration date, beyond which the practitioner's name is erased from the register. It is illegal for a practitioner to practise, if his/her name does not appear on the register of the GMC/GDC.
- Registered Professionals going on holiday over the lapse period, or on long-term sickness or away from the work place for other reasons e.g. secondment must take action, in advance, to maintain their registration. In exceptional circumstances it may not be possible to renew registration e.g. serious incapacitating illness within the timescale, for which the manager will use their discretion.

NB If payment is by cheque a delay can occur, sometimes greater than 7 days. A Bank Draft will in fact register the individual generally within 7 days

- It is the duty of the individual to notify the professional body they belong to e.g. Nursing Midwifery Council (NMC), General Medical Council, (GMC) General Dental Council, (GDC) Health & Care Professions Council, (HCPC) or General Pharmaceutical Council, (GPhC) of any change in their personal details for example: change of address. Failure to keep such details up to date will result in the individual not receiving the appropriate reminder and thus the individual not being registered.
- An individual choosing not to register; or allowing registration to lapse; would no longer be eligible to practise in that capacity and will be suspended from duty without pay as they are in breach of their contract. If after a maximum period of one month following the expiry of registration the individual has failed to re-register, it will be assumed that the individual has broken their contract and action will be taken to terminate their employment. With the exception of staff who are on the Trust's employment break scheme (see below)
- When staff go on an Employment Break, they remain an employee of the Trust. However, if the Employment Break does not necessitate them maintaining their professional registration, they will not be subject to the conditions within this policy in terms of failing to renew their registration. Once an individual returns to the Trust however all conditions/responsibilities within this policy will apply.
- Where a Registered Professional holding an honorary contract with the Trust, chooses not to register or allows their registration to lapse, their honorary contract will be withdrawn.
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5 On-going Registration Checks for permanent (substantive) staff

Permanent staff and Doctors in Training

The automated interface between the NMC, GMC register and ESR alerts the Trust to changes in the employees' eligibility to practice, automatically. Expiry dates are routinely updated. For all other professional bodies this is checked and entered manually by workforce information.

6 Lapsed Registrations & Failure to renew for permanent staff

Staff whose registration with their professional registration body has lapsed cannot practice in their professional capacity.

In respect of a failure to register or lapse for any permanent member of staff or a doctor in training the monthly ESR Exception Reports will be passed to the Human Resources manager for action as appropriate.

- On the first of each month, the Workforce Information Department will produce a report of employees whose registration is due to expire at the end of the month.
- On the first of each month, the Workforce Information Department will produce a report on employees who have not renewed their registration and their registration expired on the last day of the previous month or for medical and dental staff within the 56 days of their renewal date.
- Workforce Information Department will then contact, the appropriate governing body of those identified as not having renewed their registration, to clarify if their registration has been renewed.
- For those that have not renewed their registration or re registered and their registration has expired, the Workforce Information Department will email the employee copied to the Manager / Medical Director and Executive Director of Quality, informing them that their registration is due for renewal and if that it is not renewed by the renewal date, then they will not be eligible to practise in that capacity and they will be suspended from duty without pay immediately as they are in breach of their contract.
- A confirmatory letter of the suspension will be sent to the individual by the appropriate Manager / Medical Director
- If after a maximum period of one month following the expiry of registration the individual has failed to notify the Workforce Information Department of their re-registration, there will be a final check after which it will be assumed that the individual has broken their contract and action will be taken to terminate their employment. (Appendix 2).
- During this time there will obviously be discussions between the HR representative and appropriate Manager as to whether contact has been made. Every effort will be made to facilitate the member of staff to re-register within the timescale set out in this policy

All clinical professional staff whose registration has not been renewed by the official date of expiry of their registration will, following investigation, be suspended without pay,

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Failure to renew registration within the defined timescales may be deemed breach of contract and action will be taken to terminate their employment

7 Suspension by Professional Registration Body

Where an employee has their professional registration suspended by their issuing body or are struck off the register, the Trust will have the discretion to suspend the employee without pay whilst taking into consideration the individual circumstances.

8 Equality Analysis

The Trust expects the same standards of conduct of all employees. Managers should bear in mind the possibility that some employees may need assistance to follow or understand rules or procedures because of language or disability factors, for example. If such assistance is needed or requested, consideration should be given to providing it.

LCH aims to design and implement services, policies and measures that meet the diverse needs of its population and workforce, ensuring none are placed at a disadvantage over others.

LCH is subject to the equality duty as set out in the Equality Act 2010 and must pay “due regard” for the need to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity and foster good relations between people who share a protected characteristic and those who do not

Due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people

See appendix 4

9 Mental Capacity Act (MCA 2005 Code of Practice)

This Act applies to all persons over the age of 16 who are judged to lack capacity to consent or withhold consent to acts which are considered by health and social care professionals to be in the best interests of their welfare and health.

The Mental Capacity Act 2005 imposes a legal requirement on health and social care professionals to ‘have regard to’ relevant guidance within the Code of Practice when acting or making decisions on behalf of someone who lacks capacity to make the decision for themselves. Furthermore, they should be able to explain how they had regard to the Code when acting or making decisions.

Detailed guidance is available in the Mental Capacity Act 2005 Code of Practice (<http://www.dca.gov.uk/legal-policy/mental-capacity/mca-cp.pdf>).

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10 Risk Assessment

The process for checking professional registration for both pre employment and during employment is robust and provides assurance that all staff (who are required to be registered with a professional body) are registered in order to practise..

There are systems in place to remove any member of staff from the workplace if their registration lapses.

If large numbers of staff within an area fail to re register with their professional body this may have an impact on service delivery however this is mitigated through the use of business continuity plans.

11 Training Needs

All recruiting and line managers must have the ability to check the appropriate website to confirm professional registration status and understand what actions to take if the requirements are not met. This will be achieved through recruitment and selection training and the promotion of this policy.

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12 Monitoring Compliance and Effectiveness

Minimum requirement to be monitored / audited	Process for monitoring / audit	Lead for the monitoring/audit process	Frequency of monitoring / auditing	Lead for reviewing results	Lead for developing / reviewing action plan	Lead for monitoring action plan
Duties, both on initial appointment and ongoing thereafter	Recruitment and Selection process	Recruitment	On appointment and monthly	Executive Director of Workforce Executive (Nurse) Director of Quality Medical Director	Recruitment	Quality Governance and Risk
Process for ensuring registration checks are made directly with the relevant professional body, in accordance with their recommendations, in respect of all permanent clinical staff both on initial appointment and ongoing thereafter	Workforce information produce reports about registration and this is checked on relevant websites	Workforce information	Monthly	Executive Director of Workforce Executive (Nurse) Director of Quality Medical Director	Workforce information	Quality Governance and Risk
Process for monitoring/receiving assurance that registration checks are being carried out by all external agencies (e.g. NHS professionals, recruitment agencies etc) used by the organisation in respect of all temporary clinical staff	Recruitment and Selection process	Recruitment	Monthly	Executive Director of Workforce Executive (Nurse) Director of Quality Medical Director	Recruitment	Quality Governance and Risk

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<p>Process in place for following up these permanent clinical staff who fail to satisfy the validation of registration process</p>	<p>Workforce information produce reports and non compliance is actioned by Manager and HR</p>	<p>Workforce Information</p>	<p>Monthly</p>	<p>Executive Director of Workforce Executive (Nurse) Director of Quality Medical Director</p>	<p>Manager and HR</p>	<p>Quality Governance and Risk</p>
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13 Ratification and approval process

This policy will be approved by JNCF, it will then be ratified by the Remuneration committee.

14 Dissemination and Implementation

Professional registration is covered as part of the recruitment process and in the contract of employment.

Dissemination of this policy will be via the Workforce Department, line managers and is made available to staff via the Trust intranet.

Implementation will require Operational Directors/General Managers/Heads of Services to ensure that they and their staff understand their responsibilities for maintaining professional registration.

15 Review arrangements

The Professional Registration Policy will be reviewed in line with the timescales for Doctors revalidation and responsible officer or sooner if there are any significant changes in requirements of professional bodies.

16 Associated documents

- Contract of Employment
- Codes of Conduct for Professional Bodies
- Recruitment and Selection Policy and toolkits

17 References

- Nursing & Midwifery – www.nmc-uk.org
(LCH NHS Trust log in number 1003435, Password 2948)
- Doctors – www.gmc-uk.org
- Dentists – www.gdc-uk.org
- AHP's – www.hcpc-uk.org
- Pharmacy www.pharmacyregulation.org

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Appendix 1

DATES FOR REGISTRATION

1. **Nursing & Midwifery Staff are required to register every three years paid by annual subscription**
2. **Medical staff are required to register annually**
3. **Dental staff are required to register annually – 31st December**
4. **Allied Health Professionals are required to register every two years**

Art Therapist	<p>If appointing a newly qualified AHP member of staff, you may be unable to verify their details on the registration system, as there could be a time delay from receiving notification of state registration to HCPC updating the Website. Please therefore ask graduates to bring in their original certificate of registration.</p> <p>It is the responsibility of the Manager to check the HCPC Website on a monthly basis until registration can be verified. If after 3 months the individuals name cannot be verified on the Website, please contact your HR representative</p>
Biomedical Scientist	
Chiropodist / Podiatrist	
Clinical Scientist	
Dietitian	
Occupational Therapist	
Orthoptist	
Paramedic	
Physiotherapist	
Prosthetist & Orthotist	
Radiographer	
Psychologists	
Speech & Language Therapist	

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Appendix 2

Dear Colleague,

I am writing to confirm the content and outcome of our meeting/telephone conversation of DATE when you were suspended from duty with effect from DATE.

The reason for your suspension is that you have failed to re-register with the NMC/HCPC/GMC/GDC/ GPhC by your renewal date, despite being reminded of this.

I wish to point out that in accordance with the Professional Registration Policy, suspension from duty is without pay.

Please let me have details of your re-registration, in order that I can notify the Workforce Information Department to ensure the Trust's registration system is updated and maintained.

However, if after a maximum period of 1 month following the expiry of registration, you have failed to notify the Workforce Information Section of your re-registration, it will be assumed that you have broken your contract and action will be taken to terminate your employment .

Yours sincerely

Manager / Medical Director

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Appendix 3: Equality Analysis (EA) – Relevance Screening Form

1. Name of the document	Professional Registration Policy			
2. What are the main aims and objectives of the document	The specific aim of this policy is to assure Leeds Community Healthcare NHS Trust that all staff who are required to be professionally registered in order to practise are compliant with the requirements of their professional bodies.			
3. Is this a key strategic document?	Yes		No	
			No	
4. What impact will this document have on the public or staff?	High	Medium	Low	Don't know
			Low	
Explain:				
5. Is there any evidence, or reasons that different groups have different needs, experiences, issues and priorities in respect of this particular document?	Yes		No	
			No	
Explain:				

If you have answered **Yes** to question 3, you should move straight onto EA.

If, for question 4 you have answered **Low**, there is no need to continue to conduct an EA.

If for question 4 you have answered **Medium** and **No** for question 5, there is no need to conduct an EA.

If, for question 4 you have answered **Medium** or **Don't Know**, and have answered **Yes** or **Don't Know** for question 5 you should move on to a **Stage One** EA.

If, for question 4 you have answered **High**, you need to conduct an EA.

	Equality Analysis	None
6. Based on the result of the screening, is an EA required?		None

Amanda Wilkinson HR Manager, 11 July 2014

Policy dissemination and implementation plan - Tick boxes that apply and add comments

Amanda Wilkinson		LCH Professional Registration Policy	
	Actions	Dates	Comments
No	Induction Sessions required - provide dates:		
No	Launch Event required - provide dates:		
No	Raising at meetings, provide dates/which meetings:		
Yes	Specific Instructions for disseminating the document	Ongoing	During recruitment process
Yes	Lead for audit and monitoring		Workforce information
No	Do you require a link through to Leeds Health Pathways?		
The following will be actioned by the Workforce lead who uploads documents onto the intranet:			
<ul style="list-style-type: none"> • Email business units and departments requesting dissemination of document to applicable services • Document uploaded on the LCH intranet • Article submitted for to the next Community talk 			