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## Professional Registration Policy And Guidelines

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Type of document	Policy
Target audience	All clinical staff and managers
Document purpose	This policy outlines procedures within the Trust for checking professional registration of clinical staff on initial appointment and on an ongoing basis. It also outlines what action should be taken when staff fail to satisfy the validation of registration process.

Approving meeting	People and Organisational Development Sub Committee	Date 17/09/2018
Implementation date	November 2018	

CWP documents to be read in conjunction with	
<a href="#">HR2.2</a>	Pre-employment checks, including DBS checks
<a href="#">HR7</a>	Medical staff pre-employment checking procedure for locum doctors employed by medical staffing agencies
<a href="#">HR3.3</a>	Disciplinary Policy & Procedure
<a href="#">HR9</a>	Handling concerns about the conduct, performance and health of medical staff.

Document change history	
What is different?	Update to how lapses in registration will be handled Update to staff starting in post prior to registration
Appendices / electronic forms	Slight update to flowchart
What is the impact of change?	The range of options remain the same but the action taken will be assessed on a case by case basis taking a person centred approach

Training requirements	Select - Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Education CWP.
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Document consultation	
Clinical Services	N/A
Corporate services	Head of Resourcing/Head of People Information/Head of Human Resources & Associate Director of Nursing and Therapies
External agencies	N/A

Financial resource implications	Low
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External references	
1. NHS Employment Check Standards; <a href="https://www.nhsemployers.org/your-workforce/recruit/employment-checks">https://www.nhsemployers.org/your-workforce/recruit/employment-checks</a>	

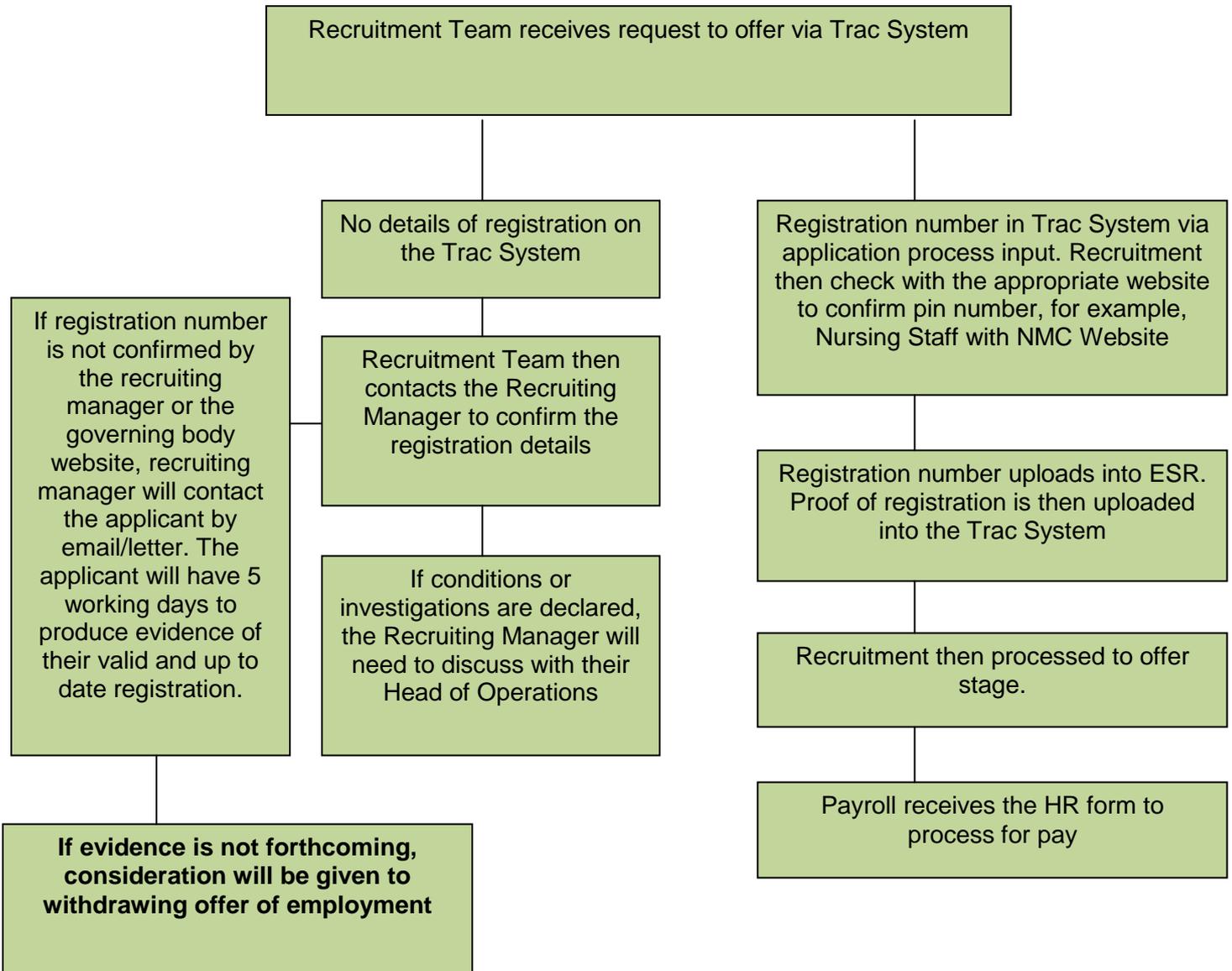
<b>Equality Impact Assessment (EIA) - Initial assessment</b>	<b>Yes/No</b>	<b>Comments</b>
Does this document affect one group less or more favourably than another on the basis of:		
- Race	No	
- Ethnic origins (including gypsies and travellers)	No	
- Nationality	No	
- Gender	No	
- Culture	No	
- Religion or belief	No	
- Sexual orientation including lesbian, gay and bisexual people	No	
- Age	No	
- Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable? No		
Is the impact of the document likely to be negative?	No	
- If so can the impact be avoided?	No	
- What alternatives are there to achieving the document without the impact?	No	
- Can we reduce the impact by taking different action?	No	

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## Quick Reference Flow Charts

Flowchart for checking registrations on initial appointment



## Flowchart for checking registrations on an ongoing basis

### Step 1 - (Week 2)

1. People Information team produce a report from ESR for all staff who require a professional registration for their current role, where their renewal date is due to expire in the next 6 weeks (to the end of the following month).
2. People Information team will check the websites for updated renewal dates for the Health and Care Professions Council (HCPC) and the General Pharmaceutical Council (GPC).
3. People Information team re-run the report and issue a reminder notification to the budget holder of staff members for expires up to 6 weeks (to the end of the following month).



### Step 2 - (2 working days before the end of the month)

1. People Information team produce a report from ESR for all staff whose registration is still due to lapse before the end of the current month.
2. People Information team will check the websites for updated renewal dates for the Health and Care Professions Council (HCPC) and the General Pharmaceutical Council (GPC) and will contact the NMC/GMC for any reason why registrations have not yet been renewed or updated.
3. People Information team issue a final 'Imminent Lapse' notification to the budget holder of staff member including any known reasons why registration has not been renewed. Also copied in to the email notification are the appropriate HR Officer and the Head of Operations.



#### Option 1- Registration Lapsed

People Information Team runs report on the 1<sup>st</sup> working day of the month

If registration has lapsed, People Information informs the appropriate Budget Holder, HR Officer and the Head of Operations

**HR to make contact with the Head of Operations to ensure action is being taken**



#### Option 2 – Registration Renewed

People Information Team runs report on the 1<sup>st</sup> working day of the month

If registration renewed, People Information will update ESR with the new expiry date as necessary

**Registration check is now complete**



#### Next steps

Undertake initial fact finding exercise.

Seek advice from the Director of Nursing, Therapies and Patient Partnerships or in the case of doctors the Medical Director and before removing from clinical duties consider;

- Redeployment into non clinical vacant post which may involve demotion
- Exclude/suspend
- Consider a formal investigation

## 1. Introduction

The Cheshire and Wirral Partnership NHS Foundation Trust, referred to hereafter as 'the Trust', recognises the importance of conducting pre and post appointment checks for all persons working in the NHS in order to meet its legal obligations, complement good appointment practices, and to ensure, as appropriate, employees, including permanent and fixed-term staff and temporary workers are registered with the relevant professional regulatory / licensing body in order to practice in their clinical specialty.

## 2. Policy Synopsis

The aim of this policy is:

- To ensure that staff who are required to be registered with a statutory regulatory / licensing body in order to practice, are fully aware of their contractual obligation to ensure that they remain eligible to practice;
- To set out the implications to non-compliance;
- To provide guidelines on checking professional registration on appointment and thereafter for all clinical staff directly employed by the Trust;
- To set out how the trust will monitor / assure itself that the checks are being carried out by all external agencies in respect of all temporary clinical staff.

Prior to appointing a health / social care professional the Trust must request the relevant regulatory / licensing body to specify whether the applicant is appropriately registered; whether that registration covers the duties to be undertaken; whether that registration is subject to any current restrictions and whether the applicant is the subject of any fitness to practice investigations which the regulatory/licensing body has a duty to disclose.

Anyone from the professions listed below must register with the relevant regulator. If they don't then they will be breaking the law.

## 3. UK Regulatory bodies

UK Nursing Midwifery Council (NMC):

- Nursing Staff.

General Medical Council (GMC):

- Medical Staff.

Personal Chiropractic Council (PCC)

- For those in the chiropractic profession

General Dental Council (GDC)

- Orthodontic therapists
- Dental Hospitals and hygienists

General Optical Council (GOC)

- Regulates the optical professions

Health and Care Professions Council (HCPC):

- Occupational therapists;
- Art therapists;
- Physiotherapists;
- Speech and language therapists;
- Clinical and Counselling Psychologists;
- Social workers.

General Pharmaceutical Council (GPhC):

- Pharmacists.

- Pharmacy Technicians.

Pharmaceutical Society of Northern Ireland (PSNI)

- Pharmacists in Northern Ireland

#### 4. Principles

It is the responsibility of EACH individual member of staff to ensure that their registration remains current at all times and that they understand that if they allow their registration to lapse they will be ineligible to practice in their relevant specialty.

The policy is based on best practice principles for pre and post appointment checks in line with the NHS Employers – NHS Employment Check Standards.

The policy provides clear information and guidelines to management and staff on their individual responsibilities relating to professional registration.

The policy provides the Trust's commitment to employing trustworthy, reliable, and appropriately registered clinical staff.

The Trust acknowledges that the production of a valid professional registration, from a registered body by a member of staff is evidence but not absolute proof of current registration. The Trust will ensure that the necessary on-line checks with the staff member's regulatory / licensing body are made.

The policy should be read in conjunction with the [pre-appointment checks - including DBS checks policy](#).

#### 5. How the organisation checks registration with the relevant professional body for all directly employed clinical staff on initial appointment

The [flowchart](#) on page 4 summarises the checking process at recruitment stage.

All staff will be requested when called for interview to bring to interview evidence of current registration with the appropriate regulatory / licensing body and on request during the course of their employment.

At offer stage, the registration number and expiry date of the successful candidate will be entered by the recruitment team into the recruitment applicant management system – Trac.

The recruitment team will verify the registration details and expiry date via the regulatory body website. The details are automatically uploaded from Trac into ESR before the written offer of employment is made.

If any conditions / investigations are declared at interview or discovered at the verification stages by the recruitment team, the recruiting manager must discuss these with the head of operations and director of nursing, therapies and patient partnership and any offer of employment decision reviewed. In the case of medical staff the decision to employ or otherwise must be discussed with the medical director. The recruitment manager will be advised in writing by the head of operations that the candidate can be appointed and that the conditions / investigations detailed by the regulatory body can be met by the Trust.

#### 6. How the organisation follows up those directly employed clinical staff who do not satisfy the validation of registration process

If the successful candidate is not registered with the appropriate regulatory body, the recruitment team will inform the recruiting manager who will contact the candidate in writing and advise that they will have 5 working days (from the date on the letter) within which to produce written evidence of their valid and up to date registration in order to enable their application to be processed. The letter

will also state that if this information is not received within the timescale specified that the offer of employment may be withdrawn.

If the evidence of registration is received within the timescale, their registration will be checked again by the recruitment team and confirmed with the recruiting manager.

If the staff member fails to declare a restriction or investigation as part of the recruitment process and has commenced in post the recruiting manager will need to discuss this with the head of operations/medical director or director of nursing, therapies and patient partnerships and decide if it is necessary to commission a fact finding investigation under the Trust's [disciplinary policy and procedure](#) for handling concerns about the conduct, performance and health of medical staff.

Whilst the above issues are being explored the recruiting manager must ensure that the staff member does not undertake any duties of a registered person.

In the case of medical recruitment, HR will verify via the GMC website that all applicants are registered with the GMC and that they hold a licence to practice. The short listing panel will be informed by HR if there are any issues arising from the checks.

#### **7. Health Professional Alert notices/HPAN portal web check**

An alert notice is a way of notifying the Trust about registered health professionals whose performance or conduct could pose a significant risk of harm to patients. The recruitment team will check the HPAN portal at the recruitment stage and also when an alert notice is received the name will be checked against recruitment information. In addition the people information team will check the name against current staffing lists. If a staff member is subject to an alert notice the appropriate head of operations and director of nursing, therapies and patient partnerships or medical director in the case of medical staff will be informed.

#### **8. Monitoring compliance at the recruitment stage**

The head of resourcing will at least annually undertake an audit to ensure compliance with the professional registration checking procedure. The audit will check that copies of the registration confirmation details are held on personal files.

#### **9. Monitoring registrations on an ongoing basis for permanent / fixed term appointments and temporary workers registered on the temporary staffing bank**

Flowchart on page 6 summarises the checking process for monitoring staff registrations.

People information will produce a monthly report detailing professional registrations that will expire the following month. ESR is automatically up dated via the interface between the GMC and NMC with renewal dates for registration.

People information will also provide regular reports for managers on staff who are due to revalidate. These will be produced at least 3 months in advance of revalidation date.

Where there is no evidence that the staff member has renewed their registration people information will notify the line manager by e-mail. The line manager will be responsible for ensuring that the staff member is informed of the expiry date and reminded to renew it immediately.

The people information team will continue to monitor the situation via the website to ensure that the renewal is made.

If the registration is not renewed by the expiry date people information will notify the line manager who will follow the guidance set out below and seek advice from HR.

The people information team will update the ESR system as necessary for HCPC's.

## **10. How the organisation follows up permanent clinical staff who fail to maintain professional registration**

If a nurse or midwife fails to renew their registration before it expires, they will be removed from the register. Readmission to the register can take between 2 and 6 weeks and, until they are readmitted, nurses and midwives will be unable to practice. The same will apply to other professionals required to be registered to practice.

Failure to maintain professional registration is an act of misconduct which may be subject to disciplinary action up to and including dismissal.

The line manager having been notified by the people information team that the registration has lapsed should undertake an initial fact finding exercise to ascertain the circumstances around the lapse and inform their head of operations immediately.

The head of operations will seek advice at executive level and from HR regarding appropriate action.

When considering action to be taken, management will take into account the following factors:

- Whether there is any evidence of any harm to patients during the period lapse;
- Reason(s) put forward for non-renewal;
- Whether the staff member has knowingly continued to practice and has failed to notify management;
- Any previous occasions when the staff member has allowed their registration to lapse;
- Whether the staff member has attempted to conceal the fact that their registration has lapsed;
- Estimated time for readmission onto the register

Temporary workers on the temporary staffing bank will be considered 'inactive' until confirmation of evidence that registration is renewed. Upon receipt of evidence of renewal, temporary workers will be reinstated on the temporary staffing register.

## **11. Newly registered employees**

Newly registered employees may be available to work prior to receiving their formal registration details. This occurs in circumstances where the professional registration number has not been forwarded to the staff member prior to them commencing with the Trust. In such circumstances the staff member may commence with the Trust as a non registered member of staff, receiving a salary commensurate with the grade of work being undertaken. On receipt of their professional registration a copy must be checked by the line manager. An ESR3 form needs completing and should confirm the date registered from and state the PIN number. In addition, confirmation of registration should be emailed to the people information and recruitment teams, where the details are checked with the relevant professional body's website and recorded on the employees Electronic Staff Record for monitoring.

Staff members will not receive backdated payment (i.e. registered rate) from the first day of employment but from when they provide their line manager with registration details in line with the verification requirements.

## **12. How the organisation makes sure that registration checks are being carried out by all external agencies (such as NHS Professionals, recruitment agencies, etc.) used by the organisation in respect of all clinical staff.**

**Agency staff** - The Trust uses agencies that have signed up to Crown Commercial Service framework agreements for the supply of staff and they are contractually required to ensure that their operational recruitment and placement policies and procedures comply with NHS Employment Check Standards. However the ultimate responsibility for pre-employment checks remains with the Trust and we need to satisfy ourselves that the agency has undertaken appropriate checks.

**Medical Locums** –The Trust seeks assurance that registration checks are carried out by external agencies by following the procedure as outlined in [medical staffing pre-appointment checking](#)

[procedure for locum doctors employed by medical staffing agencies policy](#) – appendix 3. This process will be monitored by the head of resourcing to ensure that the appropriate checks are being carried out by the temporary staffing team.

Nursing / health care professions locums – Temporary staffing are required to receive assurance from agencies that appropriate checks have been carried out and this is recorded on checklists held by temporary staffing. Temporary staffing will also check registrations directly

### **13. Monitoring compliance on an on going basis**

The head of people information will undertake at least annually an audit to ensure compliance with the professional registration checking procedure on an on going basis. The audit will as a minimum check that monthly reports are produced which identify all professional registrations due to expire in that month and that the follow up procedure is followed for any non renewals.

### **14. Cancellation of Registrations**

Should a member of staff wish to cancel their registrations, they will be required to contact the regulatory body and complete a declaration. Once the application is accepted, they will not be able to practice from this point.