

PROFESSIONAL REGISTRATION POLICY

January 2018

Authorship :	eMBED HR Policy Lead - adapted for local use by eMBED Health Consortium on behalf of NHS Vale of York CCG
Reviewing Committee :	Social Partnership Forum
Date :	04 April 2018
Approval Body :	Vale of York CCG Executive Committee
Approved Date :	20 June 2018
Review Date :	June 2022
Equality Impact Assessment :	Attached
Sustainability Impact Assessment :	Attached
Related Policies :	<ul style="list-style-type: none"> • Recruitment and Selection Policy and Procedure • Disciplinary Policy
Target Audience :	All CCG Staff
Policy Reference No. :	HR14
Version Number :	1.0

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by and Date	Date on Internet
1.0	Vale of York CCG	Draft policy for CCG	SPF – 04 April 2018	
1.0	Vale of York CCG	Draft policy for CCG	CCG Executive – 20 June 2018	25 June 2018

Table of Contents

1	INTRODUCTION	4
2	ENGAGEMENT	4
3	IMPACT ANALYSES	4
3.1	Equality	4
3.2	Sustainability	4
3.3	Bribery Act 2010.....	4
4	SCOPE	5
5	POLICY/ PURPOSE / AIMS	5
6	DEFINITIONS	5
7	ROLES / RESPONSIBILITIES / DUTIES.....	5
8	IMPLEMENTATION.....	6
9	TRAINING AND AWARENESS	6
10	MONITORING AND AUDIT	6
11	POLICY REVIEW	6
12	ASSOCIATED DOCUMENTATION.....	6
13	PART 2 : PROCEDURE	7
14	APPENDIX 1: EQUALITY IMPACT ANALYSIS FORM	11
15	APPENDIX 2 : SUSTAINABILITY IMPACT ASSESSMENT.....	15

1 INTRODUCTION

- 1.1 The CCG has a responsibility to ensure that professional standards are met. The CCG recognises the importance of conducting both pre and post-employment checks for all persons working in or for the NHS in order to meet its legal obligations, complement good employment practices, and to ensure as appropriate, existing employees are registered with a relevant regulatory/licensing body in order to continue to practice.

2 ENGAGEMENT

- Social Partnership Forum / Policy Development Group
- Vale of York CCG staff via team meetings/team brief/internet

3 IMPACT ANALYSES

3.1 Equality

In applying this policy, the CCG will have due regard to the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

An Equality Impact Assessment is attached at Appendix 1. As a result of performing the analysis, the policy does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage.

3.2 Sustainability

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix 2.

3.3 Bribery Act 2010

The Bribery Act is particularly relevant to this policy. Under the Bribery Act it is a criminal offence to :

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.

These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

Anyone with concerns or reasonably held suspicions about potentially fraudulent activity or practice should refer to the Local Anti-Fraud and Corruption Policy and contact the Local Counter Fraud Specialist

4 SCOPE

- 4.1 This policy applies to all employees of NHS Vale of York Clinical Commissioning Group (the CCG). It also applies to individuals who are not directly employed by the organisation (e.g. NHS Professionals, Agency and Locum workers) but who nevertheless are engaged in work that requires professional registration must also hold current registration.

5 POLICY/ PURPOSE / AIMS

- 5.1 The policy aims to ensure that all staff who are statutorily or organisationally required to be registered with a regulatory organisation/body to practice their speciality/field, are fully aware of their contractual obligation to be registered. The document sets out the role and responsibilities, the monitoring arrangements and the procedure for and implications for lapsed registration.
- 5.2 In accordance with NHS Employment Check Standards the CCG will ensure professional registration checks are undertaken on every prospective employee and staff in on-going NHS employment. This includes permanent staff, staff on fixed term contracts, volunteers, students, trainees, contractors and staff supplied by agencies.
- 5.3 The CCG is committed to ensuring that all personal information is managed in accordance with current data protection legislation, professional codes of practice and records management and confidentiality guidance. More detailed information can be found in the CCG's Data Protection and Confidentiality and related policies and procedures.

6 DEFINITIONS

- 6.1 For the purposes of this policy, the term professional registration refers to all posts which require the employee to be qualified in their field and maintain their registration with their respective professional bodies.

7 ROLES / RESPONSIBILITIES / DUTIES

- 7.1 In order to protect the public and ensure high standards of clinical practice it is a legal requirement that the organisation may only employ registered practitioners in qualified clinical positions. This includes the following posts that have been accepted onto the register of the statutory regulatory bodies outlined in the NHS Employment Check Standards :
- Medical and Dental
 - Nurses and Midwives
 - Allied Health Professionals
 - Healthcare Scientists
 - Hearing Aid Dispensers
 - Practitioner Psychologists
 - Pharmacy Technicians

The CCG extends the requirement for professional registration to staff in non-clinical staff groups as defined by the organisation; this includes but may not be limited to the following :

- Finance

7.2 Employees are responsible for maintaining their registration with their relevant professional body. However, the CCG as a responsible employer understands the need to support individuals to maintain their registration status.

7.3 Individuals who are not directly employed by the organisation (e.g. NHS Professionals, Agency and Locum workers) but who nevertheless are engaged in work that requires professional registration must also hold current registration. The CCG will ensure that there are processes in place to check the on-going registration of such workers.

8 IMPLEMENTATION

8.1 This policy will be communicated to staff via team meetings/team brief/staff newsletters and will be available for staff on the intranet.

8.2 Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure.

9 TRAINING AND AWARENESS

9.1 A copy of the policy will be available on the CCG intranet. Training needs will be identified via the appraisal process and training needs analysis.

10 MONITORING AND AUDIT

10.1 The implementation of this policy will be audited on an annual basis by the CCG and reported to CCG Governing Body.

11 POLICY REVIEW

11.1 The policy and procedure will be reviewed after four years for the CCG Governing Body in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

12 ASSOCIATED DOCUMENTATION

12.1 The following documents should be referred to in conjunction with this policy:

- Recruitment and Selection Policy and Procedure
- Disciplinary Policy

13 PART 2 : PROCEDURE

1 PROCEDURE

- 1.1 This procedure must be read in conjunction with the CCG's Professional Registration Policy, above.

Employee's Responsibility

- 1.2 It is ultimately the responsibility of all employees who require professional registration to practice to ensure that registration with their professional body remains current at all times and that they abide by their professional code of conduct.
- 1.3 Employees must disclose to the organisation any conditions attached to their registration at the earliest available opportunity.
- 1.4 During the course of their employment employees must, on request by management, provide evidence that their registration has been renewed in accordance with procedures laid down.
- 1.5 To provide proof of renewal to their Manager on an annual basis.
- 1.6 All personal data, particularly name changes must be communicated to both the line manager and professional body to ensure accuracy of data.
- 1.7 Lapsed registrations amount to a breach of terms and conditions of employment and as such failure to maintain professional registration and comply with the requirements of the registration may result in disciplinary action including the possibility of dismissal.
- 1.8 The registration lapse will be recorded in the employee's personal file.

Registration of Temporary Staff from External Agencies

- 1.9 It is essential that all Contractors / Agencies the CCG engages with fully meet all legal and regulatory requirements. In this respect the onus must be placed on the supplier (Contractor / Agency) entering the agreement to ensure all relevant workers fulfil all legal and regulatory registration requirements. The employee should ensure the CCG is protected contractually in the event of a supplier not fulfilling these obligations. Contractors must disclose to the organisation any conditions attached to their registration at the earliest available opportunity.

Procedure for Checking Registration – Pre Employment

- 1.10 All successful candidates who have a clinical professional registration with a licensing or regulatory body, in the UK or another country, relevant to their role are required to provide documentary evidence of up to date registration prior to appointment. An EMBED Workforce representative will check with the relevant regulatory body (e.g. GMC, NMC, HCPC, GPhC) to determine that the registration is valid. Where it is not possible to check directly with a non clinical professional body, the individual will be required to provide proof of registration.
- 1.11 Alert Notes are sent to all NHS bodies to make them aware of a doctor or other registered health professional whose performance or conduct could place patients or staff at serious risk. Alert letters are communicated to NHS bodies for those health professionals who are regulated by one or more of the following regulatory bodies:

- General Medical Council
- Nursing and Midwifery Council
- Health and Care Professionals Council
- General Dental Council
- General Optical Council
- The General Pharmaceutical Council (GPhC)
- General Chiropractic Council
- General Osteopathic Council

The eMBED Human Resources Team is responsible for managing Alert Notes according to Healthcare Professionals Alert Notice Directions 2006, transferring alert letter details to a secure database and retaining paper copies within a safe haven which is locked and accessible to a limited number of staff. As well as for cross-referencing job offers to registered health professionals with the relevant professional body.

- 1.12 Alert Database checks will be undertaken in line with local CCG recruitment procedures.

Procedure for Monitoring On-going Clinical Registration

- 1.13 The eMBED Human Resources Team will monitor all clinically professional registered staff to highlight staff due to renew their professional registration and any staff whose registration has lapsed. Quarterly reports will be produced and provided to the CCG.
- 1.14 The line managers must address any lapses as per the procedure below.
- 1.15 If the registration has not lapsed and the information is incorrect the manager must provide update information to the eMBED Human Resources Team as soon as possible, including proof of registration.
- 1.16 The manager will identify from the report any staff whose registration is due for renewal within the next quarter and make them aware.

Procedure for Monitoring On-going non Clinical Registration

- 1.17 Proof of re-registration must be provided to the line manager as soon as an individual has re-registered. The eMBED Human Resources Team will maintain a central register of non-Clinical Professional Registrations and their expiry dates.
- 1.18 On a quarterly basis the register will be reviewed to identify any gaps in updated registrations and the CCG will be notified.

Procedure for Dealing with Lapsed Registrations

Line Managers

- 1.19 Managers who identify a lapsed registration must take immediate action in accordance with this procedure. Immediate actions will include:
- Contact the member of staff immediately
 - Ensure the person is withdrawn from undertaking the duties of a qualified clinician or professional with immediate effect
 - Discuss the options with the eMBED Human Resources Team and employee
 - Check re-registration with the relevant regulatory body, receive proof of renewal and to evidence this in the personnel file
- 1.20 When considering action to be taken, managers will take account of the following factors :
- Length of time since registration has lapsed
 - Reason(s) put forward for non-renewal
 - Whether the individual has knowingly continued to practice without registration and has failed to notify management
 - Any previous occasions when the individual has allowed their registration to lapse
 - Whether the individual has attempted to conceal the fact that their registration has lapsed
- 1.21 The manager in consultation with a Workforce representative should consider the following options :
- Suspend the individual from duty without pay, and invoke the disciplinary process
 - Allow the individual to take annual leave or time owing until their registration is renewed within an agreed time frame
 - Allow the individual to take unpaid leave where no annual leave is available
 - Where feasible, consider transferring the individual staff member to another area within the organisation that offers a non-patient contact role that is of equal value.
 - Temporary downgrade into a non-qualified post specific to service need

Employee

- 1.22 Staff who recognise that their registration has lapsed must take immediate action in accordance with this procedure. Immediate actions will include :
- Inform their line manager immediately
 - Re-register with the professional body
 - Withdraw from clinical/professional practice with immediate effect in discussion with their manager or an alternative manager if the direct line manager is unavailable
 - Provide proof of renewal to the Manager
 - Provide proof and clarification of pin number if there is a discrepancy in data.

- 1.23 Since November 2015, the only way to regain registration once it has lapsed for the Nursing and Midwifery Council will be by applying for re-admission. This process can take from two to six weeks and the employee would be unable to practise during this period.

2.0 REVALIDATION

The Nursing and Midwifery Council is introducing a process for NMC registered staff of revalidation allowing nurses and midwives to maintain their registration alongside the existing arrangements for the renewal of the registration. The revalidation process will be required to be completed every three years. To enable revalidation to be successful registered professionals are required to meet a range of requirements set out and then have these signed off by a designated professional to show the individual is keeping actively up to date with their ability to practice safely and effectively. Evidence will need to be collected and records maintained to enable an individual to demonstrate they meet the set requirements and enable the designated professional to sign off on the revalidation documents and confirm the requirements have been met.

14 APPENDIX 1: EQUALITY IMPACT ANALYSIS FORM

1.	Title of policy/ programme/ service being analysed
	Professional Registration Policy
2.	Please state the aims and objectives of this work.
	The policy aims to ensure that all staff who are statutorily or organisationally required to be registered with a regulatory organisation/body to practice their specialty/field are fully aware of their contractual obligation to be registered. The document sets out the roles, responsibilities, monitoring arrangements and the procedure and process/implications for lapsed registration.
3.	Who is likely to be affected? (e.g. staff, patients, service users)
	Staff In accordance with the NHS Employment Check Standards the CCG will ensure professional registration checks are undertaken on every prospective employee and staff in on-going NHS employment. This includes permanent staff, staff on fixed term contracts, volunteers, students, trainees, contractors and staff supplied by agencies.
4.	What sources of equality information have you used to inform your piece of work?
	Employment data included for the purposes of monitoring the impact
5.	What steps have been taken ensure that the organisation has paid <u>due regard</u> to the need to eliminate discrimination, advance equal opportunities and foster good relations between people with protected characteristics
	The analysis of equalities is embedded within the CCG's Committee Terms of Reference and project management framework.
6.	Who have you involved in the development of this piece of work?
	Consultation has taken place with Trade Unions nationally and locally. Staff locally have also been consulted.
7.	What evidence do you have of any potential adverse or positive impact on groups with protected characteristics? Do you have any gaps in information? Include any supporting evidence e.g. research, data or feedback from engagement activities

<p>Disability People who are learning disabled, physically disabled, people with mental illness, sensory loss and long term chronic conditions such as diabetes, HIV)</p>	<p>Consider building access, communication requirements, making reasonable adjustments for individuals etc.</p>
<p>Considered, however there is no evidence of impact.</p>	
<p>Sex Men and Women</p>	<p>Consider gender preference in key worker, single sex accommodation etc.</p>
<p>Considered, however there is no evidence of impact.</p>	
<p>Race or nationality People of different ethnic backgrounds, including Roma Gypsies and Travellers</p>	<p>Consider cultural traditions, food requirements, communication styles, language needs etc.</p>
<p>Considered, however there is no evidence of impact.</p>	
<p>Age This applies to all age groups. This can include safeguarding, consent and child welfare</p>	<p>Consider access to services or employment based on need/merit not age, effective communication strategies etc.</p>
<p>Considered, however there is no evidence of impact.</p>	
<p>Trans People who have undergone gender reassignment (sex change) and those who identify as trans</p>	<p>Consider privacy of data, harassment, access to unisex toilets & bathing areas etc.</p>
<p>Considered, however there is no evidence of impact.</p>	
<p>Sexual orientation This will include lesbian, gay and bi-sexual people as well as heterosexual people.</p>	<p>Consider whether the service acknowledges same sex partners as next of kin, harassment, inclusive language etc.</p>
<p>Considered, however there is no evidence of impact.</p>	
<p>Religion or belief Includes religions, beliefs or no religion or belief</p>	<p>Consider holiday scheduling, appointment timing, dietary considerations, prayer space etc.</p>

Considered, however there is no evidence of impact.	
Marriage and Civil Partnership Refers to legally recognised partnerships (employment policies only)	Consider whether civil partners are included in benefit and leave policies etc.
Considered, however there is no evidence of impact.	
Pregnancy and maternity Refers to the pregnancy period and the first year after birth.	Consider impact on working arrangements, part-time working, infant caring responsibilities etc.
Considered, however there is no evidence of impact.	
Carers This relates to general caring responsibilities for someone of any age.	Consider impact on part-time working, shift-patterns, options for flexi working etc.
Considered, however there is no evidence of impact.	
Other disadvantaged groups This relates to groups experiencing health inequalities such as people living in deprived areas, new migrants, people who are homeless, ex-offenders, people with HIV.	Consider ease of access, location of service, historic take-up of service etc.
Considered, however there is no evidence of impact.	
8. Action planning for improvement	
	Please outline what mitigating actions have been considered to eliminate any adverse impact?
	N/A
	Please state if there are any opportunities to advance equality of opportunity and/ foster good relationships between different groups of people? This policy does not directly promote inclusivity. However, it applies a framework to follow a clear process to ensure healthcare professionals are appropriately registered.

Sign off

Name and signature of person / team who carried out this analysis
eMBED Human Resources Team

Date analysis completed
12 February 2014

Name and signature of responsible Director

Date analysis was approved by responsible Director

15 APPENDIX 2 : SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

Title of the document	HR14 Professional Registration Policy
What is the main purpose of the document	To ensure there is a consistent approach towards the maintenance of professional registration.
Date completed	
Completed by	eMBED Workforce

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Travel	Will it provide / improve / promote alternatives to car based transport? Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)? Will it reduce 'care miles' (telecare, care closer) to home? Will it promote active travel (cycling, walking)? Will it improve access to opportunities and facilities for all groups?	N/A		

Procurement	<p>Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery?</p> <p>Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives?</p> <p>Will it promote ethical purchasing of goods or services?</p> <p>Will it promote greater efficiency of resource use?</p> <p>Will it obtain maximum value from pharmaceuticals and technologies (medicines management, prescribing, and supply chain)?</p> <p>Will it support local or regional supply chains?</p> <p>Will it promote access to local services (care closer to home)?</p> <p>Will it make current activities more efficient or alter service delivery models?</p>	<p>N/A</p>		
Facilities Management	<p>Will it reduce the amount of waste produced or increase the amount of waste recycled?</p> <p>Will it reduce water consumption?</p>	<p>N/A</p>		
Workforce	<p>Will it provide employment opportunities for local people?</p> <p>Will it promote or support equal employment opportunities?</p> <p><u>Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)?</u></p> <p>Will it offer employment opportunities to disadvantaged groups?</p>	<p>N/A</p>		
Community Engagement	<p>Will it promote health and sustainable development?</p> <p>Have you sought the views of our communities in relation to the impact on sustainable development for this activity?</p>	<p>N/A</p>		

Buildings	<p>Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?</p> <p>Will it increase safety and security in new buildings and developments?</p> <p>Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)?</p> <p>Will it provide sympathetic and appropriate landscaping around new development?</p> <p>Will it improve access to the built environment?</p>	N/A		
Adaptation to Climate Change	<p>Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?</p>	N/A		
Models of Care	<p>Will it minimising 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?</p> <p>Will it promote prevention and self-management?</p> <p>Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available?</p> <p>Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?</p>	N/A		