

## Professional Registration Policy

**CONTROLLED DOCUMENT**

<b>CATEGORY:</b>	Policy document
<b>CLASSIFICATION:</b>	Human Resources
<b>PURPOSE</b>	This policy sets out the framework by which the Trust ensures that Healthcare Professionals employed or contracted by the Trust meet the legal requirements of maintaining their registration.
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<ul style="list-style-type: none"> <li>• <b>Essential Reading for:</b></li> <li>• <b>Information for:</b></li> </ul>	<p>All Registered Healthcare Professionals</p> <p>All Managers</p>

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## **1 Policy Statement**

- 1.1 This policy provides a framework for ensuring that all permanent and temporary healthcare professionals meet the legal requirements of maintaining their professional registration.
- 1.2 The detailed information displayed about each registrant on the professional register allows employers to directly verify that their employees are registered.
- 1.3 If the registration status of a registrant expires or is suspended with their professional body they will not be permitted to continue to practice in their position, until their re-registration status is confirmed. Where the registration is not confirmed, the individual may be subject to disciplinary proceedings up to and including dismissal.

## **2 Scope**

- 2.1 This policy applies to all healthcare professionals both permanent and temporary, who, in order to carry out the duties they are performing, are legally required to be registered with a regulatory body/professional body including, but not limited to the following:
  - the General Medical Council (GMC);
  - the Nursing and Midwifery Council (NMC);
  - the Health & Care Professions Council (HCPC);
  - the General Dental Council (GDC); and
  - the General Pharmaceutical Council (GPhC)
- 2.2 The Employment Checking Procedure details the process for ensuring registration checks are made directly with the relevant professional body in respect of permanent clinical staff on initial appointment.
- 2.3 The associated procedural documents detail the processes for ensuring ongoing registration checks are made directly with the relevant professional body in respect of all permanent clinical staff and the process in place for following up those staff who fail to maintain their registration.
- 2.4 The associated procedural documents detail the processes for monitoring/receiving assurance that registration checks are being carried out by external agencies in respect of temporary clinical staff.

### **3 Policy Framework**

#### **3.1 Definitions**

##### **3.1.1 Healthcare Professional**

A person who by education, training, certification, or registration is qualified to and is engaged in providing health care.

##### **3.1.2 Regulatory/Professional Body**

An organisation that has been legally designated as a regulator of a profession.

##### **3.1.3 Registration**

The granting of permission by a competent authority/body to an organisation or individual to engage in a legalised practice or activity. Registration is usually granted on the basis of education and examination rather than performance. It is usually permanent, but a periodic fee, demonstration of competence, or continuing education may be required. Registration may be revoked by the granting agency for incompetence, criminal acts, or other reasons stipulated in the rules governing the specific area of registration.

##### **3.1.4 Registered Healthcare Professional**

A person who has, following education and examination, been granted permission to work in a legalised position and is recorded with the registered body for their profession as competent and able to practice.

#### **3.2 Registration Bodies**

3.2.1 Registration with the appropriate Professional/ Regulatory Body is a legal requirement in order to work in the United Kingdom as a Registered Healthcare Professional and the Trust requires that all Registered Healthcare Professionals employed by it are, and continue to be, appropriately registered.

3.2.2 The Registration renewal frequency is as stated by each Regulatory/Professional Body and may change from time to time.

3.2.3 The different Registration requirements, of the various Regulatory/Professional Bodies, will be reflected in separate procedural documents which will set out the process employees are to follow in relation to establishing and maintaining their registration.

### 3.3 Requirement for Registration

- 3.3.1 Registered Healthcare Professionals are not permitted to commence work at the Trust if they are not appropriately registered with the relevant Professional/Regulatory Body.
- 3.3.2 Registered Healthcare Professionals shall be required to reconfirm that their Registration remains without restriction, is valid and unconditional and that they are not aware of any matter affecting their Registration or their eligibility to practice at their annual appraisal. However they have a duty to inform Trust Management if at any time a question arises over their fitness to practice. Any failure to comply with this requirement is a disciplinary offence and may result in suspension without pay and dismissal.
- 3.3.3 Where the Registration is subject to any conditions or restrictions, the affected Registered Healthcare Professional shall not practice outside the scope of such restrictions or conditions and shall immediately notify his/her Line Manager of the conditions and restrictions. Failure to do so, may lead to disciplinary action. Where the scope of such conditions or restrictions is such that the Registered Healthcare Professional is unable to perform all of or a substantial part of their duties, the Trust will review the terms of their employment, which could lead to a termination of their contract.
- 3.3.4 If an individual is issued with a caution, warning or conditions, on their registration, as part of an interim orders panel or conduct /competence hearing, during their employment, they must inform their line manager or an appropriate Trust manager. Failure to declare any questions over their fitness to practice may result in disciplinary action up to and including dismissal.
- 3.3.5 Newly qualified individuals that are awaiting issue of their PIN/registration number may be employed in an unregistered capacity until proof of registration is provided by them; any remuneration will reflect this status.

### 3.4 Maintaining Registration

- 3.4.1 It is the responsibility of each Registered Healthcare Professional to maintain and demonstrate their Registration with the appropriate body. This includes the timely completion of continuing professional development

where appropriate. Failure to re-register may result in disciplinary action up to and including dismissal.

3.4.2 Human Resources will provide monthly exception reports to managers, where Registrations are due to expire within 4 weeks. Checks for renewals of Registrations shall be made initially by Human Resources. Where registration is the subject of an interim order, individuals will be notified to ensure that the practitioner is not able to practice. Any lapses of Registration will be dealt with by line managers – see 4.10 below. Details of this process can be found in the associated procedural documents.

### 3.5 Alert Notices

3.5.1 Alert notices are sent to Professional leads within the Trust and HR. These are then kept on an electronic database within the Recruitment /Medical Resourcing Teams and are searched prior to recruiting an individual as part of the pre-employment checking process. If an alert notice has been issued for an individual then a check will be undertaken, through the relevant professional lead, in order to decide if they are suitable to be employed into the position offered.

3.5.2 If an alert is received for a currently registered member of staff, the Professional lead and Deputy Director of HR are notified. The member of staff will not be permitted to remain on duty and a meeting with the individual concerned will take place in line with the appropriate procedure.

### 3.6 Record keeping

3.6.1 Each Registered Healthcare Professional's Registration status is maintained on ESR by Human Resources who report data, by exception to Trust Managers. – see Section 4.4.

### 3.7 Failure to Maintain Registration

3.7.1 Failure to maintain registration whilst practising is a disciplinary offence and may result in suspension without pay and ultimately dismissal in accordance with the appropriate policy and procedure

3.7.2 Any Healthcare Professional who fails to produce evidence of Registration renewal by the expiry date will be in breach of their employment contract, being unable to fulfil the duties of a registered practitioner, and will not be permitted to perform clinical duties until the

Registration has been renewed satisfactorily. Details of this process are found in the associated procedural documents.

## **4 Duties**

### **4.1 Executive Medical Director**

4.1.1 It is the duty of the Executive Medical Director to ensure that the Trust has the appropriate mechanisms and systems in place in order to effectively verify the identity and monitor the Registration status of Doctors, Dentists, Scientists and Pharmacists and that action is taken in the event of lapses or expiry of Registration.

4.1.2 The Executive Medical Director shall approve procedures for the following employee groups: Doctors, Dental staff, Pharmacists and Healthcare Scientists, and any amendments to such documents, and is responsible for ensuring that those documents are compliant with this policy.

### **4.2 Executive Chief Nurse**

4.2.1 It is the duty of the Executive Chief Nurse to ensure that the Trust has the appropriate mechanisms and systems in place in order to effectively verify the identity and monitor the Registration status of Nurses and Allied Healthcare Professionals and that action is taken in the event of lapses or expiry of Registration.

4.2.2 The Executive Chief Nurse shall approve procedures for the following employee groups: Nurses and Allied Health Professionals, and any amendments to such documents, and is responsible for ensuring that those documents are compliant with this policy.

### **4.3 Director of Human Resources**

The Director of Human Resources is responsible for ensuring that accurate records of each Registered Healthcare Professional's Registration is kept on the Electronic Staff Record System (ESR) and provides information concerning Registration status to Trust Managers.

### **4.4 Human Resources First Contact Team/Medical Resourcing Team**

The HR First Contact Team/Medical Resourcing will undertake ongoing employment checks for all healthcare professionals. The checking process will be dictated by the professional bodies timescales. Full details are contained in the associated procedural documents.

#### 4.5 Employees

It is the duty of each Registered Healthcare Professional (the employee) to maintain their Registration with the relevant professional body and to personally take the necessary measures to prevent a lapse in their Registration. They also have a duty undertake continuing professional development to maintain a high level of competence and ensure that they inform the Trust of any reason why they are unable to practice or have restrictions on their practise i.e. fitness to practice investigations or the issuing of cautions or restrictions. Employees must inform Trust management should their registration be suspended, have lapsed for any reason or they have been issued with conditions.

#### 4.6 Recruitment Manager/Medical Resourcing Manager

The Recruitment/Medical Resourcing Manager shall ensure that the Recruitment Team verify full Registration details supplied by candidates. The Recruitment Team are responsible for the verification of PIN number details supplied by candidates for qualified Nurses, Allied Health Professionals, Pharmacists, Healthcare Scientists, Dental and Medical posts, via the NMC, HCPC, GDC, GPhC or GMC website, prior to issue of a start date with the Trust.

#### 4.7 Line Managers

4.7.1 Line managers have a duty to ensure that all Healthcare Professionals in their employment are appropriately qualified and registered to carry out the duties detailed in their job description and reflected in their contract of employment.

4.7.2 As part of the appraisal/, line managers are required to ensure an employee's competence as a Healthcare Professional and take action where they can demonstrate that the level of practice is not satisfactory.

4.7.3 Line managers must take action in accordance with the policy and procedural guidance, in instances of lapsed or altered Registration status for directly employed or contracted employees.

#### 4.8 Locate Manager (in-house staff bank)



It is the duty of the Locate Manager (in-house staff bank) to verify and record accurate registration details on appointment. The information will be recorded on their personal file and the HR1, which is input by HR First Contact Team. Ongoing checks will be undertaken by HR First Contact Team.

#### 4.9 Head of Procurement

The Head of Procurement shall ensure that all contracts between the Trust and third parties that involve the provision of services by Registered Healthcare Professionals not employed by the Trust under a contract of employment or honorary contract shall contain provisions requiring the third party to verify and warrant the registration status of such Registered Healthcare Professionals. Where possible, all Healthcare Professionals will be employed from organisations that are covered under the Crown Commercial Service (the national procurement partner for UK public services). Please see Section 10 of the Trust's Employment Checking Procedure for details.

## 5 Implementation and Monitoring

### 5.1 Implementation

This policy will be available on the Trust Intranet Site. All registrants newly employed within the Trust will be made aware of their responsibilities via this policy and through the Trust's local induction process.

### 5.2 Monitoring

See Appendix A.

## 6 References

Health Professions Council [www.HCPC-uk.org](http://www.HCPC-uk.org)

Health Professions Order 2001 (Consolidated) 1st July 2009  
[http://www.HCPC-uk.org/assets/documents/10002A16HealthProfessionsOrder2001\(consolidated\)\(July2009\).pdf](http://www.HCPC-uk.org/assets/documents/10002A16HealthProfessionsOrder2001(consolidated)(July2009).pdf)

The Nursing and Midwifery Order 2001

The PREP handbook – Nursing and Midwifery Council – April 2002

Governance and Management – Policies and Procedures  
Implementation and content – Paper by the Chief Executive – October 2001

NMC Website [www.nmc-uk.org](http://www.nmc-uk.org)

GMC Website [www.gmc-uk.org](http://www.gmc-uk.org)

GDC Website [www.gdc-uk.org/](http://www.gdc-uk.org/)

GPhC Website [www.pharmacyregulation.org](http://www.pharmacyregulation.org)

## **7 Associated Policy And Procedural Documentation**

- 7.1 Procedure for Registration of Practitioners registered with the Health Professions Council
- 7.2 Procedure for Monitoring of Staff registered with the Nursing and Midwifery Council
- 7.3 Procedure for monitoring GMC and GDC registration of medical and dental staff
- 7.4 Procedure for the registration of Practitioners registered with the General Pharmaceutical Council
- 7.5 Trust Disciplinary Policy and Maintaining High Professional Standards Policy
- 7.6 Procedure for Employment Checking
- 7.7 Medical Locum Booking Procedure
- 7.8 Corporate and LOCATE Local Induction Procedure for staff employed via LOCATE

## MONITORING MATRIX

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/GROUP	MONITORING PROCESS	MONITORING FREQUENCY
Adherence to the policy and the associated Registration procedures	Human Resources Department	Professional Lead for relevant area e.g. medical director for medics etc	Monthly reports for all staff requiring to be registered by a professional body are run by HR First Contact team. Where registration has lapsed this is reported to the relevant Lead for that area. These reports are done on a rolling basis to ensure no staff are missed.	Monthly
Registrants failing to maintain registration	Human Resources Department	Board of Directors	All cases recorded in Annual Workforce Plan.	Annual
Assurance from external agencies that they complete professional registration checks	Human Resources Department	Board of Directors	Audit reports every 3 years provided by agencies. Reported to Board of Directors via Annual Workforce Plan	Annual
GMC	Medical Resourcing	Medical Resourcing	GMC database is automatically linked with ESR	Real time daily check
GDC	Medical Resourcing	Board of Directors	Review of the database	Annual