

Professional Registration Policy & Procedure

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| 1 | SUMMARY | Professional Registration Policy & Procedure | | | |
| 2 | RESPONSIBLE PERSON: | NCL Director of Corporate Services | | | |
| 3 | ACCOUNTABLE DIRECTOR: | Chief Operating Officer, Haringey & Islington CCGs | | | |
| 4 | APPLIES TO: | All employees | | | |
| 5 | GROUPS/ INDIVIDUALS WHO HAVE OVERSEEN THE DEVELOPMENT OF THIS POLICY: | HR, NEL CSU | | | |
| 6 | GROUPS WHICH WERE CONSULTED AND HAVE GIVEN APPROVAL: | NCL Joint Partnership Group – July 2016 | | | |
| 7 | EQUALITY IMPACT ANALYSIS COMPLETED: | Policy Screened | Yes | Template completed | Yes |
| 8 | RATIFYING COMMITTEE(S) & DATE OF FINAL APPROVAL: | Executive Management Team Haringey & Islington CCGs – 20 March 2018 | | | |
| 9 | VERSION: | 1 | | | |
| 10 | AVAILABLE ON: | Intranet | Yes | Website | No |
| 11 | RELATED DOCUMENTS: | N/A | | | |
| 12 | DISSEMINATED TO: | All employees | | | |
| 13 | DATE OF IMPLEMENTATION: | 20 March 2018 | | | |
| 14 | DATE OF NEXT FORMAL REVIEW: | December 2019 or earlier should there be national NHS terms & condition/ legislative changes | | | |

PROFESSIONAL REGISTRATION POLICY AND PROCEDURE

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1. POLICY STATEMENT

Islington CCG has a responsibility to ensure that health care professionals employed at the Islington CCG are registered with appropriate regulatory bodies, where this is a condition of them practising, so that any adverse risk to patient safety is minimised. Recognising 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.

- 1.2 For the purposes of this policy, the term professional registration refers to all posts which requires the employee to be qualified in their field as a requirement of their post and to periodically renew their registration with their respective professional bodies.
- 1.3 The policy aims to ensure that all staff required to be registered with a statutory 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.
- 1.4 In accordance with NHS Employment Check Standards, the CCG is required to ensure that document checks are undertaken on every prospective employee and staff in ongoing NHS employment. This includes permanent staff, staff on fixed term contracts, volunteers, students, trainees, contractors and staff supplied by agencies.

2. PRINCIPLES

- 2.1 In order to protect the public and ensure high standards of clinical practice it is a legal requirement that the CCG 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
- 2.2 Employees are responsible for maintaining their registration with their relevant professional body.
- 2.3 Individuals who are not directly employed by the CCG (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 organisation will ensure that there are processes in place to check the ongoing registration of such workers.

3. EQUALITY STATEMENT

- 3.1 In applying this policy, the CCG will have due regard for 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.

4. MONITORING & REVIEW

- 4.1 The policy and procedure will be reviewed periodically by Human Resources in conjunction with operational managers and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.
- 4.2 The implementation of this policy will be audited on an annual basis by CSU HR Team and reported to the CSU Transition Team on a six monthly basis.

1. PROCEDURE

Employees Responsibility

- 1.1 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.
- 1.2 Employees/contractors must disclose to the CCG any conditions attached to his/her registration at the earliest available opportunity.
- 1.3 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.
- 1.4 To provide proof of renewal to their line manager.
- 1.5 Failure to maintain professional registration and comply with the requirements of the registration may result in disciplinary action.
- 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 may result in action in accordance with the Disciplinary Policy, including dismissal.
- 1.8 The registration lapse will be recorded in the employees personnel file.
- 1.9 Repeated lapses in registration may lead to disciplinary action under Islington CCG's Disciplinary Policy.

Registration of Temporary Staff from External Agencies

- 1.10 It is essential that all contractors and agencies the CCG engage with fully meet all legal and regulatory requirements. These include, but are not limited to, the Data Protection Act (1998), the NHS Confidentiality Code of Practice (Approved DoH Guidance 2003), all Criminal Records Bureau requirements, Registration with the appropriate Professional Bodies where appropriate, confirmation of Fitness to Work, Home Office status if applicable and working within the EWTD regulations (Working Time Directive 1993 and Working Time Regulations 1998).
- 1.11 In this respect the onus must be placed on the supplier (Contractor / Agency) to ensure all relevant workers fulfil all legal and regulatory requirements. The CCG will ensure it is protected contractually in the event of a supplier not fulfilling these obligations.
- 1.12 In order to facilitate this, all managers must, use the services of agency suppliers awarded 'Preferred Supplier status by the Crown Commercial Service (<http://ccs-agreements.cabinetoffice.gov.uk/>) unless there are exceptional circumstances. All suppliers on the Multidisciplinary Temporary Healthcare Personnel Framework (<http://ccs-agreements.cabinetoffice.gov.uk/contracts/rm3711>) meet legal and regulatory requirements, through the national sourcing process undertaken by the Crown Commercial Service.

- 1.13 Where agency staff are being used that are not on the Multidisciplinary Temporary Healthcare Personnel Framework, the line manager will be responsible for ensuring written assurance is sought from the supplier that they are abiding by NHS Employers Employment Check Standards.
- 1.14 The CCG will conduct audits periodically to ensure compliance.

Procedure for Checking Registration – Pre-employment

- 1.15 The CCG must advise the CSU HR team if the post requires professional registration, providing details of the relevant regulatory body, as listed below, at the recruitment stage:
- 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

Requirement to be registered must be included in the job description and person specification, as well as notified on the Establishment Control Form (ECF).

- 1.16 All successful candidates who have a 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. The CSU HR team will check with the relevant regulatory body to determine that the registration is valid. No new employee will be permitted to commence with the CCG until proof of valid registration has been received.
- 1.17 Where professional registration is a requirement of the post ongoing registration as outlined above will be monitored through the CCG and the CSU HR team.
- 1.18 Alert Database checks will be undertaken by the CSU HR team in line with the NHS Employers standards.
- 1.19 Alert letters 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 regulatory bodies.

Procedure for Monitoring Ongoing Registration

- 1.20 The CSU HR team, will monitor all professionally registered staff to highlight staff due to renew their professional registration and any staff whose registration has lapsed. The notifications will be sent to the relevant Director/line manager.

Procedure for Dealing with Lapsed Registrations.

Line Managers

- 1.21 Managers who identify a lapsed registration must take immediate action in accordance with the procedure below:
- 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 HR Team and employee
 - Check re-registration with the relevant regulatory body, receive proof of renewal and to evidence this in the personnel file
- 1.22 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
- 1.23 The manager in consultation with a Human Resources representative should consider the following options:
- 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
 - Suspend the individual from duty without pay, invoke disciplinary process
 - 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

- 1.24 Staff who recognise that their registration has lapsed must take immediate action in accordance with this policy and procedure below:
- Inform their line manager immediately
 - Re-register with the professional body (in most cases this will be achievable within 1 or 2 working days)
 - Withdraw from clinical/professional practice with immediate effect in discussion with their manager
 - Provide proof of renewal to the Manager
 - Provide proof and clarification of pin number if there is a discrepancy in data

Failure to comply with maintaining your professional registration and this policy and procedure may result in disciplinary action under the CCG's Disciplinary Policy.

Equality Analysis Initial Assessment

Title of the change proposal or policy:

Professional Registration Policy

Brief description of the proposal:

To ensure that the policy amends are fit for purpose, that the policy is legally compliant, complies with NHSLA standards, NHS Employment Check Standards, Professional Code of practice and takes account of best practice.

Name(s) and role(s) of staff completing this assessment:

Kasia Parfieniuk, HR Adviser

Date of assessment: 1 March 2016

Please answer the following questions in relation to the proposed change:

Will it affect employees, customers, and/or the public? Please state which.

Yes, it will affect all employees who need professional registration for their role. It will also affect members of the public applying for positions within the organisation which require professional registration.

Is it a major change affecting how a service or policy is delivered or accessed?

No

Will it have an effect on how other organisations operate in terms of equality?

No

If you conclude that there will not be a detrimental impact on any equality group, caused by the proposed change, please state how you have reached that conclusion:

No anticipated detrimental impact on any equality group. The policy adheres to the NHS LA Standards, NHS Employment Check Standards, Professional Code of practice and takes account of best practice. Makes all reasonable provision to ensure equity of access.

Please return a copy of the completed form to the Equality & Diversity Manager