



Public – To be published on the Trust external website

Title: Verification and registration of health care employees

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1 Introduction

Professional regulation is intended to protect the public, making sure that those who practice in a particular health care profession can do so safely. Registration with a relevant professional body provides the necessary assurance that a person is committed to providing high standards of care.

This procedure is critical to the delivery of Our Journey to Change (OJTC) and our ambition to co-create safe and personalised care that improves the lives of people with mental health needs, a learning disability or autism. It helps us deliver our three strategic goals.

This procedure supports the trust to co-create a great experience for all patients, carers and families from its diverse population by providing an assurance we are committed to providing high standards of care,

This procedure supports the trust to co-create a great experience for our colleagues by demonstrating we are a well led and managed organisation.

2 Purpose

Following this procedure will help the Trust to demonstrate adherence to the required standards outlined within the NHS Employers Employment Check Standards – Professional Registration and Qualification Checks and the requirements of the Care Quality Commission (CQC) to ensure that all regulated professionally registered staff have their registration both verified at recruitment and throughout employment with their appropriate regulatory bodies.

The procedure will enable us to:-

- Demonstrate compliance with the requirements of professional regulation used to protect the public within our employment processes.
- Outline the process for validating professional registration on appointment and for ongoing registration throughout employment within the Trust.
- Outline the steps we will take when a registration is allowed to lapse.

3 Who this procedure applies to

This Procedure applies to all employees of the Trust, including temporary and bank staff, locums, contractors and volunteers who are employed in a role which is **required by law to be registered with any of the following regulatory bodies to practice.**

- General Medical Council (GMC)
- Nursing and Midwifery Council (NMC)
- Health and Care Professions Council (HCPC)
- General Pharmaceutical Council (GPhC)
- Social Work England

Statutory regulation refers to health and social care professions which must be registered with a professional regulatory body by law. The titles used by regulated professionals are also legally protected.



The Procedure also applies to all employees of the Trust as outlined above who fall within the definition of an **unregulated practitioner** but who are employed in a role which the Trust has identified as being required to be registered with one of the accredited registers managed by the Professional Standards Authority.

4 Related Documents

[Recruitment and Selection Procedure](#)

[Managing concerns of Potential Conduct Procedure](#)

[Managing concerns of Potential Conduct Guidance](#)

[Dealing with concerns affecting Medical Staff](#)

5 Procedure

5.1 Confirmation of registration on the appointment of regulated healthcare professionals as part of the pre-employment screening process.



NHS Employers Employment Standard: Professional Registration and Qualification Checks includes full details of the checks to be undertaken for all prospective appointees. The following link provides up-to-date information [Professional registration and qualification checks | NHS Employers](#).

Each statutory regulatory body has their own system in place for confirming that a prospective employee is registered on the professional register and what their status is on the register.

The Trust is responsible for ensuring all new employees who require registration to practice by a regulatory body have appropriate and current registration prior to the commencement of their employment with the Trust. This also applies to those employed in an **unregulated role** which the Trust has identified as being required to be registered with one of the accredited registers managed by the Professional Standards Authority.



As part of the pre-employment recruitment process prior to the commencement of employment, the Recruitment Team, Temporary Staffing Team or Medical Development Department (for Medical Staff), will verify the professional registration details and registrant numbers provided by the applicant.

5.2 Maintenance of registration throughout employment

Regulatory bodies require their registrants to maintain active membership of the professional register usually with a periodic re-registration procedure.

It is the responsibility of each Director to ensure there are robust systems in place to support and monitor the effective maintenance of active registration by registrants.



All registrants are personally responsible for taking appropriate actions to maintain their active registration, through compliance with regulatory standards, completing professional practice and development requirements and submitting administrative information and payment in a timely manner to their professional regulatory body. They should provide their line manager with documentary proof of registration as renewed or inform their line manager immediately of any risk to the maintenance of their active registration.

Medical Development will ensure a system is in place to monitor the active registration of medical staff. The process will also include the Medical Development department verifying registration with the GMC website.

The Workforce Information team will produce and circulate reports highlighting which registrant employees are due for re-registration.



General Managers / Heads of Service and Associate Directors are responsible for ensuring that local robust monitoring procedures are in operation to ensure re-registration has taken place. A copy of the registration will be maintained on the personnel file.

The Workforce Information team will ensure verification of registration both on appointment and throughout employment are recorded on ESR (Electronic Staff Record system). They will ensure an effective monitoring system is in place to verify that re-registration has taken place.

5.3 Professional Registration recording on ESR and on-going professional registration checks

The Workforce Information team and Medical Development team will maintain accurate records on ESR of professional registration details. Workforce Information will inform the appropriate Professional Lead and line manager when registration is due for renewal on a monthly basis.

The GMC allows a three month 'grace' period for Doctors to renew their registration. If the Doctor fails to renew their registration following reminders this is then reported to the Clinical Director.

All GMC registrations are linked into the ESR system which will show when a Doctor has renewed.

5.4 Failure to maintain registration

5.4.1 Reasons for lapses

A registrant employee may fail to maintain registration due to:

- Being unable to meet the ongoing registration requirements.
- Not completing the re-registration procedures in place with the regulatory or registration body
- Non-payment of registration or retention fees
- The professional body's own complaints and referrals procedures resulting in refusal to re-register or suspension or removal from the regulatory body's database

5.4.2 Actions to be taken when lapsed registration occurs



If a line manager, a representative of the People and Culture Directorate or the Medical Development department becomes aware of any registrant where their registration has lapsed they **must** directly inform:

- The appropriate General Manager /Associate Director of Nursing
- The Professional Lead

For medical employees - if a second reminder letter fails to generate the submission of a valid registration certificate, the Medical Director and appropriate Clinical Director will be informed. The Medical Director, in conjunction with the Clinical Director, will make arrangements to meet with the individual as soon as possible and agree an appropriate action plan in line with GMC standards.

For all other registrant employees - once the line manager is aware that registration has lapsed/is not able to be maintained through re-registration, arrangements will be made to meet with the registrant as soon as possible to discuss the situation and establish the facts of the registration lapse.

In circumstances where the registrant is working and they have failed to maintain an active registration, they will be viewed as making themselves unavailable for work. The line manager will suspend the individual on nil pay until confirmation of re-registration.

Nil pay will apply from the date of registration lapse and all terms and conditions will be reinstated from the date of re-registration once verification of that active registration is produced.

In circumstances where the individual is absent from work due to sickness or other employment procedures, the line manager will complete an individual case assessment and case management plan in liaison with the professional lead.

All discussions will be documented and will include the action to be taken to ensure renewal of registration. ([Appendix 3](#)). A file note will be made in the registered employee’s personnel file and a copy of the action plan forwarded to the HR Operational Team, professional head and Payroll to make any necessary salary adjustments.

Some cases may require additional referral to the Trust’s [Managing concerns of Potential Conduct Procedure](#) or [Managing Concerns of Potential Poor Performance \(Capability\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#) (Medical staff only) or other policies and procedures. All regulatory bodies have mechanisms in place to investigate further any concerns regarding a registrant’s conduct, fitness to practice and competence that may affect registration status.

6 Definitions

Term	Definition
Statutory Regulation	<ul style="list-style-type: none"> All the statutory systems that are used to assure the public that certain health and social care workers are appropriately educated and working to set standards of practice, behaviour and ethics with clear systems of accountability to the public.
Statutory Regulatory Body	<ul style="list-style-type: none"> The statutory organisation that holds the register of health or social care workers, sets and monitors both the requirements for entry to the register and the standards for practice, behaviour and ethics for those registered. A regulatory body has systems in place for the receipt and process of complaints about those registered
Professional Registration	<ul style="list-style-type: none"> The confirmation of appropriate eligibility to practice within the framework of the relevant statutory regulatory body
Professional Register	<ul style="list-style-type: none"> The list of people who meet the relevant statutory regulatory body requirements for registration – known as registrants.
Unregulated Practitioner	<ul style="list-style-type: none"> A practitioner employed in a role which the Trust has identified as being required to be registered with one of the accredited registers managed by the Professional Standards Authority.

7 How this procedure will be implemented



This procedure will be published on the Trust’s intranet and external website.

Line managers will disseminate this procedure to all Trust employees through a line management briefing.

The People and Culture Directorate and Medical Development will implement robust processes to enable adherence to the Professional Registration requirements.

7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
n/a			

8 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	100% of recruits requiring a professional registration will be confirmed by the recruitment team with the professional registration body.	On an annual basis audit will sample a proportion of new starters to check professional registration verified as part of pre-employment screening.	People and Culture leadership group will monitor actions identified.
2	100% of current staff requiring a professional registration to practice will renew registration as required.	Monthly reports will be produced by the Workforce Information team to highlight details of staff failing to renew registration. The details will be passed to the People Partner representatives for further actions.	People and Culture leadership group will monitor actions identified.

9 References

- NHS Employers Employment Check Standards www.nhsemployers.org/your-workforce/recruit/employment-checks/professional-registration-and-qualification-checks
- General Medical Council (GMC) www.gmc-uk.org.uk
- Nursing & Midwifery Council (NMC) www.nmc.org.uk
- Health & Care Professions Council (HCPC) www.hcpc-uk.org
- General Pharmaceutical Council (GPhC) www.pharmacyregulation.org
- Social Work England www.socialworkengland.org.uk
- Professional Standards Authority www.professionalstandards.org.uk

10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	20 March 2024
Next review date	20 March 2027
This document replaces	CLIN-0020-v6.1 Professional Registration Policy and Procedure
This document was approved by	Policy Working Group
This document was approved	15 December 2023
This document was ratified by	Management Group
This document was ratified	20 March 2024
An equality analysis was completed on this policy on	28 November 2022
Document type	Public
FOI Clause (Private documents only)	n/a

Change record

Version	Date	Amendment details	Status
7	20 Mar 2024	1/ transferred to current procedure template (note - was a policy at last version); 2/ addition of OJTC text; 3/ refreshed wording in the 'Purpose' section & inclusion of refreshed 'Objectives' wording from v6.1; 4/ refresh of '3Who this procedure applies to' including those covered by Social Work England and inclusion of guidance on those deemed " unregulated practitioner "; 5/ removal of separate section for "2.2 Roles and responsibilities"; 6/ updated links to related documents; 7/ refreshed wording covering "pre-employment screening process"; 8/ refreshed wording covering "5.2 Maintenance of registration throughout employment"; 9/ refreshed wording covering "on-going professional registration checks";	Published

		<p>10/ updates to team names and job titles to reflect restructure throughout;</p> <p>11/ Definitions section updated;</p> <p>12/ inclusion of section “7 How this procedure will be implemented”;</p> <p>13/ inclusion of section “8 How the implementation of this procedure will be monitored”;</p> <p>14/ references refreshed;</p> <p>15/ removal of professional appendices and inclusion of approval checklist;</p>	

Appendix 1 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	People and Culture
Title	Verification and registration of health care employees
Type	Procedure
Geographical area covered	Trustwide
Aims and objectives	<p>Demonstrate compliance with the requirements of professional regulation used to protect the public within our employment processes.</p> <p>Outline the process for validating professional registration on appointment and for ongoing registration throughout employment within the Trust.</p> <p>Outline the steps we will take when a registration is allowed to lapse.</p>
Start date of Equality Analysis Screening	08 August 2022
End date of Equality Analysis Screening	28 November 2022

Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	Ensures the Trust is compliant with the law on employing staff who are required to hold a statutory registration to practice.
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	
Describe any positive impacts / Human Rights Implications	

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Legislation in relation to professional registration. NHS Employers Mandatory Standard on Professional Registration
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	yes
If you answered Yes above, describe the engagement and involvement that has taken place	Staff Side Representatives through the Staff Policy Working Group
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	
Describe any training needs for patients	
Describe any training needs for contractors or other outside agencies	

Check the information you have provided and ensure additional evidence can be provided if asked.

Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	Staff Policy Working Group
Has relevant expertise has been sought/used?	Yes	NHS Employers Employment Standard. Professional Registered Bodies
Is there evidence of consultation with stakeholders and users?	Yes	
Have any related documents or documents that are impacted by this change been identified and updated?	No	
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	Yes	
Are supporting documents referenced?	Yes	
6. Training		

Have training needs been considered?	Yes	
Are training needs included in the document?	No	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	28 th November 2022
9. Approval		
Does the document identify which committee/group will approve it?	Yes	PWG
10. Publication		
Has the policy been reviewed for harm?	Yes	
Does the document identify whether it is private or public?	yes	Public
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	yes	
Do all pictures and tables have meaningful alternative text?	yes	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	yes	

Appendix 3 – Professional Registration Action Plan

Staff Details

NAME _____
PAYROLL NUMBER _____
JOB TITLE _____
BASE _____
DIRECTORATE _____
LINE MANAGERS NAME _____
LINE MANAGERS JOB TITLE _____
PROFESSIONAL BODY _____

Details of the lapse (Please give the reasons and any other additional information)

--

Actions (Please state what actions have been agreed)

--

Pay

ACTION TO PAY _____
EFFECTIVE FROM _____

Employees signature

Date

Manager's signature.....

Date

**PLEASE RETAIN A COPY OF THIS FORM ON THE INDIVIDUAL'S PERSONAL FILE AND
SEND AN ELECTRONIC COPY TO WORKFORCE INFORMATION**