



**South West
Yorkshire Partnership**
NHS Foundation Trust

Document name:	Registration of Health and Social Care Professionals and other Staff Required to Maintain Registration Policy.
Document type:	Policy Version 1.7
Staff group to whom it applies:	All Professional and industry registered staff
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Next review:	August 2026
Approved by:	Executive Management Team on 17 August 2023
Developed by:	Senior HR Advisor and the Employment Policy Group which consists of representatives from staff side, management and People Directorate.
Director lead:	Chief People Officer
Contact for advice:	People Directorate Representative.

With **all of us** in mind.

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Policy Regarding the Registration of Doctors, Nurses, Nursing Associates, Pharmacists, Pharmacy Technicians, Psychologists, Allied Health Professionals and Non Clinical Staff

1.0 Introduction

It is a legal requirement that doctors, nurses, nursing associates, pharmacists, pharmacy technicians, psychologists, and Allied Health Professionals, are registered with their appropriate regulatory body. Registration is also an obligatory requirement of their contract of employment with the Trust. The employment of staff whose registration has lapsed or has been suspended/restricted, continuing to work in the NHS jeopardises the protection to which the public are entitled, and the safety of service users/clients may potentially be compromised. This policy describes the process to ensure this doesn't happen.

- 1.1 This policy and procedure applies to all employed clinical staff who require professional registration to practice and sets out the various responsibilities and actions required to ensure the registration required by registering bodies is maintained by staff, whether employed on a substantive or temporary basis. This also applies to Medical/Nursing Revalidation as appropriate, see Appendix 1. (This policy does not apply to agency staff, please see Agency Staff - Guidance Regarding their Use for information on registration)
- 1.2 There are also non-clinical professional staff who are required to maintain professional registration, who are covered under this policy. This requirement should be reflected in their job description/person specification. E.g Gas safe registration, CIPD etc.
- 1.3 This policy and procedure should be read in conjunction with the Trust's Recruitment and Resourcing Policy, the Agency Staff – Guidance regarding their use, the Values based Corporate and Local Induction Policy and protocol for Bank staff.

2.0 The Responsibility of the Executive Management Team (EMT)

The EMT will be responsible for scrutinising and approving this policy.

3.0 The Responsibility of the People Directorate

The Employment Services and Systems team will send out monthly renewal reminders of all professional registrations due to lapse, to relevant managers and professional leads, via e-mail. The recruitment Team will check professional registration status during their Pre employment checks process as per the Recruitment and Resourcing Policy

4.0 The Responsibility of Employees

Unless registered, an employee who requires a current professional registration, does not have the legal authority to practice.

It is an employees responsibility (not the Trusts) to ensure they are aware of their renewal date and that they renew their registration on time.

The Employee must:

- Maintain current and continuous registration and validity of all recordable qualifications necessary for their role e.g., prescribing qualification in addition to professional registration.
- Inform their manager if they have conditions placed on their practice by the registering body and not exceed these conditions.
- Inform their manager if they have a suspension order placed on their practice by the registering body.
- Comply promptly with reminder notifications received from their registering body.
- Advise their manager, as soon as possible, if any difficulty is experienced in registering/re-registering.
- Advise their manager immediately of anything that may potentially compromise their registration e.g., police cautions, convictions etc.
- Provide appropriate evidence of registration/re-registration attempts such as emails or bank transfers if there is a problem
- Ensure that the registering body and the Trust are promptly notified of changes to their private addresses, contact details or bank details.

Practitioners should be aware of the seriousness of not being appropriately registered as necessary for the role. Failure to re-register will lead to suspension without pay and may lead to disciplinary action up to and including dismissal.

5.0 The Responsibility of Managers

- Managers are responsible for verifying the registration of new starters on their start date and following up if a concern is highlighted to them around the periodic renewal of registration for staff required to maintain registration in order to practice. They must also ensure that a non-registered practitioner does not continue to practice in a registered capacity or any other capacity for which they do not have a contract of employment

6.0 Procedure for checking registration

Managers must:

- Check with the registering body, via the internet, to ensure new starters are registered and that periodic renewals of registration have been carried out by staff, See Appendix 2 and 3 for links to relevant websites. A copy of the appropriate web page must be downloaded/printed by the manager and kept on personal files. The Registration card is not proof of registration.
- Ensure that the ESR support team who maintain the ESR records is informed of their staff's PIN. This enables up to date registration to be checked with the registering body and maintained on the People Directorate Electronic Staff Record (ESR) computer database.

- Ensure that they are aware of any conditions of practice set down by the registering body on an individual practitioner and that the individual adheres to these conditions.
- Ensure that where a Nurse, Nursing Associate or Health and Care Professional (HCP) student has completed their training and is awaiting their registration number, they do not work as a registered practitioner until their registration is confirmed.
- Note that nurses are only issued with a “statement of entry” certificate when they are first placed on the register. If their registration changes a letter of re-registration is issued, which states the nurse’s eligibility to practice in specific areas of the register (e.g., to prescribe drugs).

6.1 **Non-Clinical staff**

- Managers must check registration where it is required to undertake the responsibilities of the post e.g., Accountancy and record this on ESR, with appropriate renewal dates. Regularly check registration is current and confirm the new renewal date to The People Directorate. In these cases, continued professional registration must be included in the person specification as an essential criterion for the post.

6.2 **Dealing with lapsed registration**

Managers must inform the individual:

- Of the seriousness of the situation and to cease practising in a registered capacity immediately.

Note: Where a lapse of registration has occurred, which is not the fault of the individual; advice should be sought from an Operational HR Practitioner

- That they are suspended from duty without pay until evidence of re-registration is provided. Inform payroll of the suspension immediately to avoid any over payment. It should be noted that it can take the Professional bodies between 2-6 weeks to complete re-registration.
- That the taking of (paid) annual leave, compatible with their contract of employment, is not an acceptable alternative as the contract of employment requires the practitioner to be registered.
- That the payment of Occupational Sick pay or Occupational Maternity pay will be suspended during the period of the lapse as the contract of employment requires the practitioner to remain registered, Statutory sick and statutory maternity pay is unaffected.
- That failure to maintain registration without good reason is regarded as a breach of their contract of employment. As a consequence, this may be investigated in line with the Trust’s Disciplinary Procedure.
- If they fail to take reasonable steps to re-register, that the position will be discussed with a HR Practitioner to decide on appropriate action, which

could include, invoking the disciplinary procedure, which could lead to disciplinary action up to and including dismissal.

- Confirm any actions outlined above in writing to the individual concerned. (See suggested model letter Appendix 4)
- Inform the relevant Professional Lead should any practice issues arise as a result of a lapse in registration.
- Continue to monitor the position, until the individual is re-registered.
- Once re registered pay will be reinstated from the date the registration is confirmed by the trust. The suspension will be reviewed on this date and the individual may return to work where provided any potential disciplinary is unlikely to result in dismissal.

6.3 Dealing with suspension from the register

- Individuals must inform their manager at the earliest opportunity that their registration has been suspended, the reasons why and the length of the suspension.
- Managers should inform the individual that they are suspended without pay until a decision has been made with regards to their contract of employment. (suspension from the register is deemed as a breach of contract and so the Trust would need to look at the circumstances to ensure the appropriate course of action is followed
- That the taking of (paid) annual leave, compatible with their contract of employment, is not an acceptable alternative as the contract of employment requires the practitioner to be registered.
- That the payment of Occupational sick pay or Occupational maternity pay will be suspended during any suspension from the register as the contract of employment requires the practitioner to remain registered. Statutory sick and statutory maternity pay is unaffected
- That a meeting will be convened with a Trust Senior Manager to consider the consequences of their suspension order on their future employment with the Trust, the outcome of which could lead to their dismissal.
- Confirm any actions outlined above in writing to the individual concerned

7.0 HR Monitoring Procedure

- Each month the HR System and Information team will check on the first working day of the month via the appropriate registration web site, for those registrations that were due for renewal the previous month. They will then update ESR and inform the appropriate manager and professional lead of any lapses of registration.

- Where re-registration is not forthcoming, or there is an issue regarding re-registration, the HR Systems and Information team will escalate the matter by informing the General Manager. Managers can check registration details via ESR.
- Spot audit checks will be undertaken by The People Directorate on the process outlined in the policy. Where the policy is not being followed (e.g., where a serious lapse of registration has occurred) appropriate measures will then be taken to address the issues, including reviewing the policy.
- Compliance of agencies is monitored through a quarterly report on agency expenditure to the Trust's Audit committee which provides details of expenditure per agency provider and whether those suppliers are on a formal contract or are a non-contract provider.
- Where contract suppliers are unable to supply a placement, assurance is required from the non-contract agency that they are compliant. The use of non-contract agencies will require the agreement of the Chief People Officer

8.0 Equality Impact Assessment

The EIA is included at Appendix 5.

9.0 Version Control

The Version control sheet is included at Appendix 6.

An introduction to Medical/Nursing Revalidation

Medical Revalidation

Revalidation is the process by which all licensed doctors are required to demonstrate on a regular basis that they are up to date and fit to practice in their chosen field and able to provide a good level of care. This means that holding a license to practice is becoming an indicator that the doctor continues to meet the professional standards set by the GMC and the specialists' standard set by the medical Royal Colleges and Faculties.

Revalidation aims to give extra confidence to patients that their doctor is being regularly checked by their employer and the GMC.

If a doctor holds a license to practice, they are legally required to revalidate, usually every five years, by having annual appraisal based on the GMC's core guidance for doctors, *Good medical practice*.

(Extract from the GMC website)

Nursing and Midwifery Revalidation

In April 2016, the NMC introduced a process of revalidation, this replaces the Prep requirements.

Revalidation is the process by which registered nurses and midwives are required to regularly demonstrate to the NMC that they remain fit to practice.

All nurses and midwives on the register will be revalidated every three years at the point of their renewal. Each nurse and midwife will take ownership of their revalidation.

Those who do not revalidate will lapse from the register. Those who wish to revalidate will be required to continually gather evidence for their revalidation based on criteria in the revised Code, standards, and guidance.

(Extract from the NMC website)

Links to Other Regulators

Should the Trust need to check that a Social Worker is registered, this can be checked on the HCPC website at: <http://www.hcpc-uk.org/>

NB as of 1 August 2012 the regulation of the social work profession and education has transferred to the Health and Care Professions Council (HCPC). The General Social Care Council (GSCC) website and all of its content has been archived for reference purposes only. To access an archive of the website please visit the National Archives: <http://www.nationalarchives.gov.uk>

Useful Links to Professional Organisation's Regulator Web Sites

<http://www.gmc-uk.org/register/search/index.asp>
- GMC (*Medical Staff*)

<https://www.nmc.org.uk/Employer-confirmations/>
-NMC (*Nursing staff – General Register Search*)

<http://www.hcpc-uk.org/>
- HCPC (*Health and Care Professions Council*)

<http://www.pharmacyregulation.org/>
- GPC General Pharmaceutical Council (*Pharmacists and Pharmacy Technicians*)

Appendix 3

Timescale for Renewal of Registration

Staff Group	Registering Body	Period of Validity	End of Registration Year (where applicable)
Medical	General Medical Council	Revalidation – 5 Yearly	Variable
Nurses, Midwives, Health Visitors and Nursing Associates	Nursing & Midwifery Council	Annually. 3 yearly revalidations from 2016	Variable
Physiotherapists	Health Professions Council	Two yearly	30 April
Occupational Therapists	Health Professions Council	Two yearly	31 October
Chiropodists, Podiatrists	Health Professions Council	Two yearly	31 July
Speech & Language Therapists	Health Professions Council	Two yearly	30 September
Art Therapists	Health Professions Council	Two yearly	31 May
Dietitians	Health Professions Council	Two yearly	30 June
Psychologists	Health Professions Council	Two yearly	31 May
Pharmacists Pharmacy Technicians	General Pharmaceutical Council	Annually	Variable

DATE

Name
Address
Postcode

Name of office/team
Location address
Address
Address
Postcode

Tel:
Ref:
Email address

Dear

Lapse/suspension of Registration

I have been notified that your registration with your registering body has lapsed/been suspended.

As you are aware, as an employee of the Trust and in the role you are employed to do, registration is an obligatory contractual requirement and, as such, you must remain registered at all times in order to undertake your duties with the Trust.

In line with the Trust's Registration Policy, as your registration has lapsed/been suspended, you are regarded as being in breach of your contract. At this time, you will be suspended without pay until you are re-registered, or a decision has been reached by the Trust regarding the options for your future employment. This suspension will take effect fromand remain in place until the situation is resolved.

I also need to advise you that this is a potential conduct issue as registration is a mandatory requirement. Letting your registration lapse/being suspended from the register may be investigated in line with the Trust's Disciplinary Procedure. This could lead to disciplinary action up to and including dismissal.

Please keep in touch with me to let me know what is happening with regards your re-registration. You must inform me as soon as you are re-registered, so that your suspension may be lifted before you are able to return to work.

Yours sincerely
Name and title

Copies to: HR and Payroll

Chair: Marie Burnham Interim chief executive: Mark Brooks

Equality Impact Assessment template to be completed for all policies, procedures and strategies

Date of EIA: 24/04/2023

Review Date: August 2026

Completed By: Susan Glass

	QUESTIONS	ANSWERS AND ACTIONS
1	What is being assessed? Prompt: what is the function of this document (new or revised)	Registration of Doctors, Nurses, Psychologists, Pharmacists, Pharmacy Technicians, Allied Health Professionals and Non Clinical Staff Policy This policy aims to ensure staff meet their obligations to remain registered in order to practice.
2	Description of the document Prompt: What is the aim of this document	It is a legal requirement that Doctors, Nurses, Psychologists, Pharmacists, Pharmacy Technicians, Allied Health Professionals and some non clinical staff, are registered with their appropriate registering body. This policy sets out the various responsibilities and actions required to ensure that registration is maintained by staff, whether employed on a substantive or a temporary basis. It should ensure that staff fulfil their professional requirement to be registered with the appropriate registering body and that service users and the Trust are appropriately protected.
3	Lead contact person for the Equality Impact Assessment	Chief People Officer
4	Who else is involved in undertaking this Equality Impact Assessment	Members of the employment Policy sub Group, consisting of management and staff side representatives
5	Sources of information used to identify barriers etc Prompts: service delivery equality data – refer to equality dashboards (BI Reporting - Home (sharepoint.com)), satisfaction surveys, complaints, local demographics, national or local research & statistics, anecdotal. Contact InvolvingPeople@swyt.nhs.uk for insight What does your research tell you about the impact your proposal will have on the following equality groups?	As it is a staff specific policy, service users were not involved. Staff Side Organisations and managers in the EPG represent the interests of staff. The Trust's Equality Workforce information as at January 2023, WRES, WDES It is not anticipated that this Policy will have any negative impact on any of the equality groups as it is a legal requirement for staff to be registered in order to practice.

5a	Disability Groups: Prompt: Learning Disabilities or Difficulties, Physical, Visual, Hearing disabilities and people with long term conditions such Diabetes, Cancer, Stroke, Heart Disease etc. Accessible information standard	8.4% of staff have a registered disability. The need to be registered and the consequences of not being so are not affected by a persons disability.
	QUESTIONS	ANSWERS AND ACTIONS
5b	Gender: Prompt: Female & Male issues should be considered	Female – 79.3% Male – 20.7% Everyone who is in a role requiring a professional registration is covered equally by this policy.
5c	Age: Prompt: Older people & Young People issues should be considered	19 and under – 0.1% 20 – 29 – 13.7% 30 – 39 – 23.9% 40 – 49 – 23.7% 50 – 59 – 27.4% 60 – 69 – 10.5% 70 + - 0.5% Everyone who is in a role requiring a professional registration is covered equally by this policy
5d	Sexual Orientation: Prompt: Heterosexual, Bisexual, Gay, Lesbian groups are included in this Category	Gay or Lesbian– 2.3% Heterosexual – 82.8% Bisexual – 1.2% Unknown – 13.6% Everyone who is in a role requiring a professional registration is covered equally by this policy
5e	Religion & Belief: Prompt: Main faith groups and people with no belief or philosophical belief issues should be considered	Atheism - 20% Christianity – 47% Islam – 4% Other – 11% Unknown 18% Everyone who is in a role requiring a professional registration is covered equally by this policy
5f	Marriage and Civil Partnership Prompt: Single, Married, Co-habiting, Widowed, Civil Partnership status are included in this category	Civil partnership – 1.2% Divorced/legally separated – 9.6% Married – 50.1% Single – 37.4% Widowed – 0.9% Unknown – 0.8% Everyone who is in a role requiring a professional registration is covered equally by this policy
5g	Pregnancy and Maternity Prompt: Currently pregnant or have been pregnant in the last 12 months should be considered	No information available in the Trust’s monitoring data.

		Everyone who is in a role requiring a professional registration is covered equally by this policy
5h	Gender Re-assignment Prompt: Transgender issues should be considered	No information available in the Trust's monitoring data, however, based on national statistics it has been projected that up to 1% of the Trust's workforce could be gender variant. Everyone who is in a role requiring a professional registration is covered equally by this policy
5i	Carers Prompt: Caring responsibilities paid or unpaid, hours this is done should be considered	It is not anticipated there will be any negative impact on service users or their carers, however, it would be expected that if any issues arose they would be captured and reported during consultation with staff. Everyone who is in a role requiring a professional registration is covered equally by this policy
5j	Race Prompt: Indigenous population and BME Groups such as Black African and Caribbean, Mixed Heritage, South Asian, Chinese, Irish, new Migrant, Asylum & Refugee, Gypsy & Travelling communities.)	Asian – 5.2% Black – 4.44% Chinese Other – 1.25% Mixed – 1.4% White – 87.46% Everyone who is in a role requiring a professional registration is covered equally by this policy

Action Plan

EIAs are now reviewed using a grading approach which is in line with our Equality Delivery System (EDS). This rates the quality of the EIA. This means that the team can review the EIA and make recommendations only. The rating and suggested standards are set out below:

- **Under-developed** – red – **No data. No strands** of equality
- **Developing** – amber – **Some census data plus workforce. Two strands** of equality addressed
- **Achieving** – green – **Some census data plus workforce. Five strands** of equality addressed
- **Excelling** – purple – **All the data and all the strands** addressed

Potential themes for actions: Geographical location, built environment, timing, costs of the service, make up of your workforce, stereotypes and assumptions, equality monitoring, community relations/cohesion, same sex wards and care, specific issues/barriers.

Who will benefit from this action? (tick all that apply)		Action 1: This is what we are going to do	Lead/s	By when	Update -outcome	RAG
Age	<input type="checkbox"/>	To develop a system to capture equality data for Professional Registration lapses/sanctions to support colleagues to be able to fulfil this requirement periodically as required	People Directorate	Q4 2023		
Disability	<input type="checkbox"/>					
Gender reassignment	<input type="checkbox"/>					
Marriage and civil partnership	<input type="checkbox"/>					
Race	<input type="checkbox"/>					
Religion or belief	<input type="checkbox"/>					
Sex	<input type="checkbox"/>					
Sexual Orientation	<input type="checkbox"/>					
Pregnancy maternity	<input type="checkbox"/>					
Carers	<input type="checkbox"/>					

Who will benefit from this action? (tick all that apply)		Action 2: This is what we are going to do	Lead/s	By when	Update -outcome	RAG
Age	<input type="checkbox"/>	To analyse equality data once available to identify any barriers/trends relating to sanctions/lapsed registration	People Directorate	Q4 2023		
Disability	<input type="checkbox"/>					
Gender reassignment	<input type="checkbox"/>					
Marriage and civil partnership	<input type="checkbox"/>					
Race	<input type="checkbox"/>					
Religion or belief	<input type="checkbox"/>					
Sex	<input type="checkbox"/>					
Sexual Orientation	<input type="checkbox"/>					
Pregnancy maternity	<input type="checkbox"/>					
Carers	<input type="checkbox"/>					

Who will benefit from this action? (tick all that apply)		Action 3: This is what we are going to do	Lead/s	By when	Update -outcome	RAG
Age	<input type="checkbox"/>					
Disability	<input type="checkbox"/>					
Gender reassignment	<input type="checkbox"/>					
Marriage and civil partnership	<input type="checkbox"/>					
Race	<input type="checkbox"/>					
Religion or belief	<input type="checkbox"/>					
Sex	<input type="checkbox"/>					
Sexual Orientation	<input type="checkbox"/>					
Pregnancy maternity	<input type="checkbox"/>					
Carers	<input type="checkbox"/>					

Involvement & Insight: New or Previous (please include any evidence of activity undertaken in the box below)

Consultation with staff side via the Employment Policy Group and Trust Partnership Forum. This is a minor policy review as part of the scheduled review process. Learning from the operation of the policy & comments from Employment Policy Group members have been taken into account in updating the document. Also been reviewed by Professions.

7 Methods of Monitoring progress on Actions

Considering any issue that arise following the implementation of the policy and amending the documentation as required.


Development of a system to collate equality data.

Monitoring of compliance

8 Publishing the Equality Impact Assessment

As an appendix to the policy with copy available on the intranet

9 Signing off Equality Impact Assessment:



Lindsay Jensen, Deputy Chief People Officer, Date 28.6.23

***Once approved, you must forward a copy of this
Assessment/Action Plan by email to:
InvolvingPeople@swyt.nhs.uk***

**Please note that the EIA is a public document and will be published
on the web.**

**Failing to complete an EIA could expose the Trust to future legal
challenge.**

Appendix 6

Version Control Sheet

This sheet provides a history of previous versions of the policy and changes made

Version	Date	Author	Status	Comment / changes
1.0	Jan 2010	James Corson HR Business Manager	Previous	Not first version, but first revision, post Policy Development Policy. Minor changes to reflect changes to PASA and new Foundation Trust status. Also noting that Drs now need a LtP and Practitioner Psychologists will need to be registered by 1 st June 2011.
1.1	June 2010	James Corson HR Business Manager	Previous	Addition regarding role of profession leads if individual not renewed. Also process for non clinical staff who are required to have renewable registration as part of essential job requirement
1.2	Sept 2010	James Corson HR Business Manager	Previous	Addition of a flow chart at Appendix 6 to clarify the current process of how registration is checked.
1.3	Oct 2012	Andrea Richards Senior HR Advisor/James Corson HR Business Manager	Previous	Updated with regards to new Guidance Regulations; Statutory Regulation of Practitioner Psychologists and Pharmacy Technicians, Government Procurement Service and Medical Revalidation. It also incorporates other minor changes. This policy replaces all previous policies of the former organisations including Barnsley, Wakefield and Calderdale PCTs.
1.4	June 2014	James Corson HR Business Manager	Previous	A small amendment made to the model letter at Appendix 4 and the relevant associated text at 5.1. The purpose being to strengthen the wording to reinforce the gravity of the situation if an individual is not registered.
1.5	Aug 2016	Marilyn Gill HR Business Partner	Previous	Minor updating.
1.6	Feb 2020	HR Business Partner	previous	Minor updating
1.7	April 2023	Snr HR Advisor	current	Addition for suspended registration and Nursing Associates.