



Professional Registration Policy

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The CCG is committed to an environment that promotes equality, embraces diversity and respects human rights both within our workforce and in service delivery. This document should be implemented with due regard to this commitment.

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Version Control Sheet

Version	Date	Reviewed By	Comment
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1. Policy Statement

1.1. The CCG recognises the importance of conducting appropriate pre and post appointment checks for all persons working in the CCG who are required to hold a professional qualification.

1.2. The aim of this policy is;

- To ensure that employees who are required to be registered with a statutory or regulatory organisation/body in order to practice in their clinical speciality, maintain their registration and are fully aware of their contractual obligation to the CCG to maintain that registration.
- To ensure that employees who are not legally obligated to hold membership of a professional body, but where such membership was a condition of their employment, maintain that membership as contractually required.
- To set out the implications in relation to non-compliance.
- To provide guidelines on checking professional registration.

2. Scope

2.1. This policy applies to all employees who are required as a practicing clinician, or where it is condition of their employment with the CCG, to be registered with a relevant body.

3. Principles

3.1. The principals of the policy are as follows:

- The implementation of this policy is the responsibility of the Senior Managers reporting to Board Members who will, within their own Directorate, authorise any action to be taken.
- The policy is based on best practice principles for pre and post appointment checks.
- The policy provides clear information and guidelines to all on their individual and corporate responsibilities relating to professional registration.
- The policy sets out the CCG's commitment to employing trustworthy, reliable and appropriately registered / professionally qualified employees.

3.2. Production of a PIN/registration card is not absolute proof of current registration and the CCG will always undertake checks with the individual's Registration Governing Bodies.

4. Responsibility

4.1. Chief Officer

4.2. The Chief Officer has overall responsibility for ensuring that the Professional Registration Policy has been developed, and that its implementation and application is monitored and reported to ensure the CCG meets its legal and NHS obligations.

4.3. HR Service Provider

4.4. The HR Service provider will be responsible for ensuring that the requirements of this policy are met.

4.5. The HR service provider will:

- Monitor Professional Registration information to ensure the policy is applied fairly and equitably and provide reports, as requested by the Chief Officer.
- Provide regular management information reports in support of the CCG's HR Dashboard and other performance monitoring requirements.

4.6. Managers

Managers will;

- Apply the Professional Registration Policy fairly and equitably.
- Ensure that upon appointment, members of employees are made aware of the Policy and their obligations within it.
- Undertake an investigation, as necessary, where there is a lapse in registration.

4.7. Employees

Employees will;

- read and work within the CCG's policies and to ensure that they keep themselves up to date with any new or revised procedural documentation issued by the CCG.
- ensure that their registration remains current at all times. Employees who allow their registration to lapse become ineligible to practice in their relevant specialty and are in breach of their contract of employment with the CCG.
- During the course of their employment an employee may be requested, without notice, to provide evidence of their current registration.

- bring to the attention of the HR service provider any part of this document which is no longer relevant or that requires revision. Employees should not wait until the review date of the document to notify HR of any errors or suggested amendments.

4.8. Committees/Groups

- The Clinical Executive Committee is responsible for the scrutiny and review of this policy and to recommend that the policy is put forward for approval or to, within the delegated power of that Committee, ratify this policy for use.

5. Procedure

5.1. Expiry of Professional Registration/Failure to Renew Registration

5.2. In the event of an employee's member's professional registration not being renewed prior to the expiry date and where management becomes aware that an individual's registration has lapsed, the circumstances around the lapse of registration will be investigated immediately.

5.3. The investigation will be undertaken by the Line Manager. The Line Manager must notify the Chief Officer and HR Service Provider of the lapse in registration and the outcome of the investigation, including any recommendations for further action against the employee together with a proposal for resolution of the lapsed registration. The Chief Officer must approve this proposal before any action is taken.

5.4. Depending on the individual circumstances, management may consider alternative action as follows;

- Transfer to alternative duties at the appropriate rate of pay until confirmation is received that registration is reinstated.
- Cover the period until registration is reinstated by annual leave. During this leave salary payment will be at the appropriate rate of pay for non registered employees.
- Suspend the individual from duty without pay until evidence that the registration has been renewed is provided.

5.5. If the Line Manager feels it is appropriate, they may also recommend, in addition to one of the above options, commencing disciplinary action under the CCG's Disciplinary Policy.

5.6. When considering actions to be taken, management will take account of the following;

- Length of time since registration has lapsed;
- Reason(s) put forward for non-renewal;

- Whether the individual has knowingly continued to practice 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 that their registration had lapsed.

6. Recruitment Stage

- 6.1.** On commencement of employment new employees will be required to produce evidence of up-to-date registration and during the course of their employment may, at any time, be required to provide evidence that their registration is still current.
- 6.2.** It is the responsibility of the Recruiting Manager (Chair of the Selection Panel) to verify the registration, as part of the pre-employment check.
- 6.3.** The PIN/GMC number must be verified with the relevant regulatory body by telephone/internet (e.g. NMC/GMC) before an offer of employment is made. The PIN must be requested for verification at interview and will be recorded by the HR service provider as part of the recruitment process.
- 6.4.** A photocopy of the PIN/GMC No. will be taken at the same time as other employment checks (e.g. DBS and right to work checks) and placed on the individual's Personal File by HR Service Provider.
- 6.5.** Where managers are using temporary, interim or agency employees they must be hired through NHS Purchasing and Supply Agency (PASA) approved agencies. Approved agencies must undertake all pre-appointment checks on employees including registration with Regulatory and Professional Bodies.

7. Initial Registration

- 7.1.** Following the pre-employment checks, newly qualified employees can work prior to receiving their formal registration details; by commencing employment as an unqualified member of employees, receiving a salary commensurate with the grade of work undertaken. On receipt of their PIN and verification checks undertaken by HR Service Provider, the employee will commence duties as a qualified member of employees, receiving the appropriate salary from the date at which registration is verified.

8. Appropriate Grade of Pay for Duties/Work Performed

- 8.1.** Employees must be paid at a salary appropriate to the grade at which they are working and their current registration status.
- 8.2.** The newly qualified employee who's status is yet to be verified or an employee on suspension or downscaling of duties will not receive backdated payment (e.g. at a qualified rate) once their registration is confirmed. Payment at the

qualified salary level will only commence from the date at which the registration details are verified.

- 8.3. The Line Manager must ensure that newly qualified employees, or employee's undertaking alternative duties, do not perform qualified duties until their registration status and PIN has been verified.

9. Equality Statement

- 9.1. 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.
- 9.2. An Equality Impact Assessment has been carried out on this policy and can be viewed upon request to HR Service Provider.

10. Monitoring and Review

- 10.1. The policy and procedure will be reviewed every 2 years by HR Service Provider in conjunction with operational managers and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.
- 10.2. The HR Service Provider will provide monitoring information in order for the Clinical Executive Committee to monitor the implementation of this policy.