



**Lindsey Lodge Hospice & Healthcare**

# **Policy and Procedure for Managing Professional Registration**

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## **1. Introduction**

Statutory regulation of healthcare professionals exists to ensure standards of practice by regulated practitioners and to protect the public as far as possible against the risk of poor practice.

The Hospice recognises it has a duty of care to patients and will take all appropriate measures to verify the professional registration of all employees and Bank workers covered by this policy, both before appointment and at regular intervals thereafter.

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.

## **2. Scope**

This policy applies to all employees who are required to hold appropriate professional registration as part of their employment with the Hospice which include the General Medical Council, the Nursing and Midwifery Council and the Health Care Professions Council.

The policy also applies to Hospice Bank workers, voluntary staff (e.g. voluntary therapists and counsellors) Agency Staff, Contractors and Self-Employed practitioners engaged to work in roles which require professional registration with a regulatory body.

The Hospice also recognises the importance of continuing professional development and for individuals to demonstrate compliance with the required standards of competency: It is recognised that in parallel to ensuring systems are in place to check professional registration the Hospice will also expect that individuals to take responsibility for ensuring competency and for their revalidation, completing prescribed and mandatory training as required and participating in an annual appraisal in order to ensure they are able to demonstrate competency within their specific roles.

## **3. Aims**

The aim of this policy is to provide a framework for both managers and professionally registered practitioners to understand their roles and responsibilities in maintaining professional registration.

To set out procedures for verifying registration prior to the employment for all relevant staff ensuring appropriate documentary checking, together with setting out procedures for verifying registration during employment for all relevant staff groups, ensuring appropriate checking and record keeping arrangements are in place.

#### 4. **Duties (Roles and responsibilities)**

The Chief Executive is accountable to the Board of Trustees for ensuring organisational wide compliance with policy and ensuring all Managers/Team Leaders are aware of the policy and implement it effectively.

Line managers/Team Leaders will be responsible to the Chief Executive for ensuring policy implementation. Managers/Team Leaders have a responsibility to monitor on a monthly basis professional registration renewal dates for their staff and to verify they have renewed registration. Managers/Team Leaders are responsible for ensuring that their staff are competent to practice at all times and maintain the necessary professional registration and fitness to practice for their employment. The priority is to safeguard patients and any manager who identifies a lapsed registration must take immediate action including contacting the member of staff immediately and discussing the options with a member of the Workforce Department.

Employees - All employees covered under this policy are responsible for maintaining their professional registration and for ensuring that they comply with its requirements. This includes notifying their regulatory body of any changes in their circumstances, particularly a change of address. Employees are responsible for providing evidence of their registration renewal to their manager/the Workforce Department. Failure to maintain professional registration is viewed seriously and the offence may constitute gross misconduct under the Hospice's disciplinary procedure.

All individuals within posts that require professional registration have a duty to inform their employer and the professional body of any police caution or conviction (e.g. drink driving offence). This should not only be declared during the application process prior to any appointment, but also at any time during employment with Hospice and at the time of the caution or conviction. Failure to do so may result in disciplinary action being considered by the Hospice.

Workforces Department - Records of professionally registered staff will be maintained by the Workforce Department. The Workforce Department is responsible for carrying out pre-employment checks on all qualified recruits to ensure they hold appropriate professional registration for their employment and are not currently subject to action which may affect their appointment e.g. restrictions, fitness to practice investigation, suspension. A copy of the relevant registration certificate will be placed on the individual's personal file and a note made of the renewal date on the workforce department's information system 'Staffcare'.

The Workforce department will be responsible for running a monthly report to check registrations that are due for renewal and alert line managers/ the individual concerned. They will ensure updated registration status is then recorded on the Staffcare system.

Agency Worker Suppliers - Agencies are responsible for ensuring the professional workers they supply are subjected to pre-employment checks; are competent to practice at all times; and maintain their professional registration and fitness to practice at all times. Agencies have a

responsibility to implement an appropriate process in order to monitor the professional registration expiry dates of their workers and to verify registration is renewed at the appropriate time

Self-Employed: Managers/Team Leaders who use any self-employed professionals who fall within the remit of this policy must check and verify their professional registration and fitness to practice before they start work in accordance with the procedural steps set out. Depending on the duration of the individual's employment and/or when their registration is due to expire, managers must ensure they verify the practitioner's re-registration and fitness to practice each time it is renewed in accordance with the procedures set out.

#### **5. Processes for Checking – Pre-Employment**

The Workforce Department is responsible for verifying the professional registration of new recruits, and existing staff when appointed to a new position, before they start work. The Workforce Administrator will evidence the individual's professional registration on-line via the relevant regulatory body's website. The Workforce Administrator will ensure this is recorded centrally on the Staffcare information system.

The Workforce Department will also perform a check against information received via practitioner lists from professional bodies and the NHS Alert Notice process.

#### **6. Process for Checking – post-employment**

The Workforce department will ensure a record is kept of all registration and will ensure these are checked via the relevant reporting systems on a monthly basis to identify which staff's registration is due to expire at the end of the month.

Workforce will notify the individual and the line manager that re-registration is due. The Workforce Administrator will ensure a further check is undertaken to establish that registration has taken place and a copy printed for the personal file. The system will be updated with the new expiry date.

#### **7. Action in the event of non-registration.**

Any lapses in registration or matches against alert notices will be notified immediately for action to the Chief Executive or Deputy Chief Executive. In circumstances where registration with the appropriate regulatory body has lapsed the individual will be in breach of their terms and conditions of employment as it is the individual's personal responsibility to ensure that they are appropriately registered to carry out their role. If a member of staff allows his/her registration to lapse, the member of staff will be placed on unpaid special leave or outstanding paid annual with the agreement of the Chief Executive/ Duty Chief Executive. Individuals will not be permitted to work within their substantive role until their registration has been renewed. When considering appropriate action to be taken the Chief Executive/Deputy Chief Executive will take account of the following factors: length of time since registration has lapsed, the reasons put forward for non-renewal, whether the individual has knowingly continued to practice without registration, and any previous occasions when the individual has allowed their

registration to lapse. In exceptional circumstances and only with the agreement of the Chief Executive/Deputy Chief Executive the individual may be permitted to work and be paid as an unregistered member of staff.

The appropriate line manager must interview the individual in order to understand why the lapse in registration has happened, and document this in the personal file. The individual will be required to renew their registration within a timescale agreed and cannot practice within their substantive role until such time as registration is renewed. The individual will be required to remain on unpaid special leave or in exceptional circumstances work as an unregistered member of staff where there is agreement as set out above, until the Hospice is able to confirm that he/she is back on the register.

**8. Monitoring and Governance Arrangements**

An annual audit will be undertaken to ensure compliance with the professional registration checking procedures. The audit will check that monthly reports are provided which identify all professional registrations due to expire in that month and the follow up procedure for non-renewal. This policy and associated processes will be monitored by the Workforce Committee.

REFERENCES: Pre and Post Employment Check Procedure  
 The Hospice’s Disciplinary Policy and Procedure/ Staff Handbook.

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Ratification by HR Committee date: 20<sup>th</sup> February 2018

Review internal: This policy and procedure will be reviewed after 3 years or earlier at the request of the Workforce Committee.

TO BE REVIEWED	REVIEW COMPLETED	BY	APPROVED BY	CIRCULATION
Feb 2021	14 Sept 21	JLH	Workforce Committee	L: Policies & Guidelines
Sept 2024				