



# Verification of Professional Registration

Policy No. W16.8

Additionally refer to:           Handling Concerns about for Doctors and Dentists  
  Secondment Policy  
  Recruitment and Selection Policy  
  Disciplinary Policy

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4.1		11.02.22	Workforce Assurance Manager	Final	Added policy on a page

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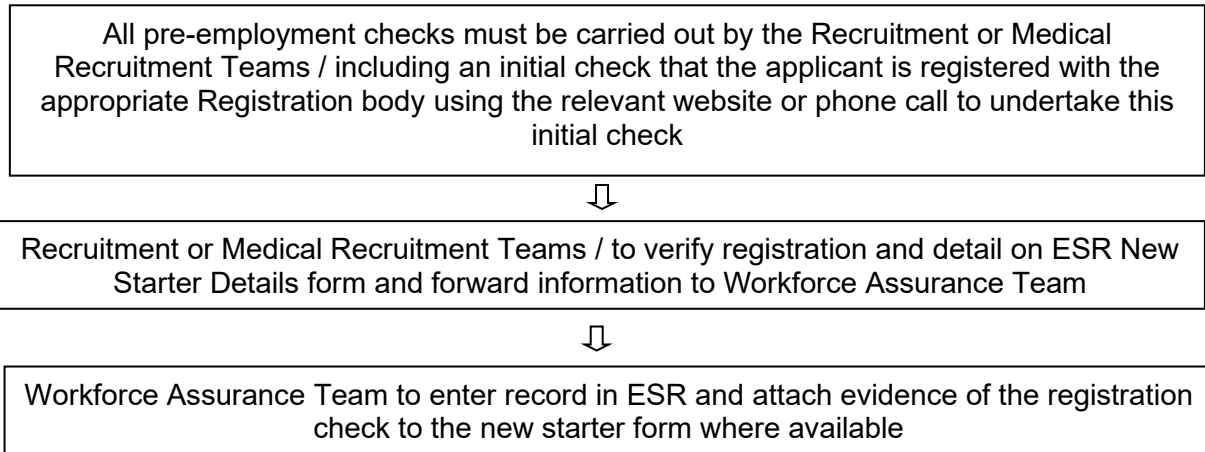
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## 1 Policy On a Page

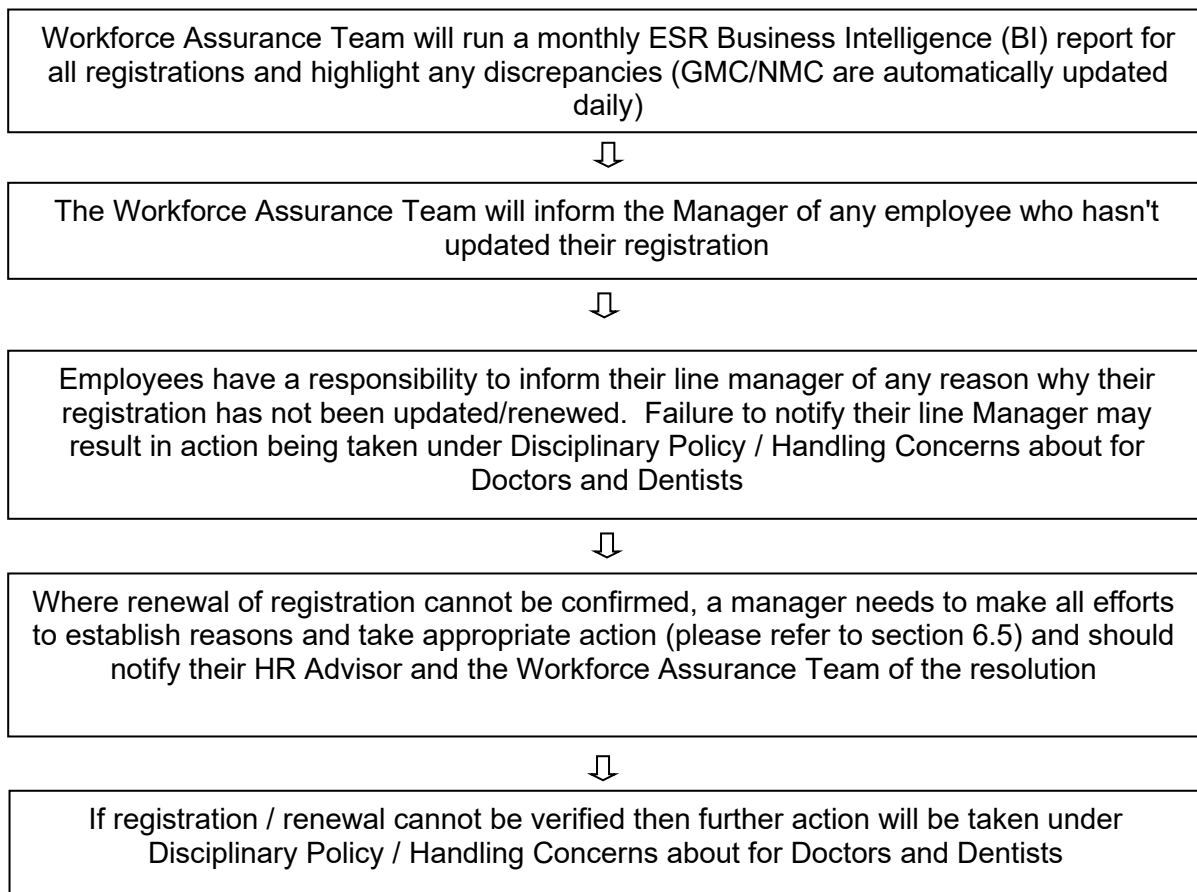
- 1.1 The Shrewsbury and Telford Hospital NHS Trust (The Trust) strives to provide high quality safe care for our patients. It is the responsibility of The Trust to ensure all employees and workers employed in positions that require a professional registration with an appropriate regulatory organisation in order to practise within their professions maintain and update their valid professional registration during employment with the Trust.
- 1.2 This policy sets the standards and the process for ensuring verification of professional registration and maintenance of appropriate professional registration records.

### Flow Chart for collecting and maintaining professional registration data

#### New Employee



#### Checks during Employment:



## 2 Scope

2.1 The policy applies to all employees and workers in the following staff groups:

Regulatory Body	Staff Groups covered
Health and Care Professions Council (interfaces with ESR)	Arts Therapists Biomedical Scientists (Medical Laboratory Technicians) Chiropodists/Podiatrists Clinical Scientists Dietitians Occupational Therapists Operating Department Practitioners Orthoptists Paramedics Physiotherapists Prosthetists and Orthotists Radiographers Speech and Language Therapists Hearing Aid Dispenser Practitioner Psychologist
General Medical Council (interfaces with ESR)	Doctors
Nursing and Midwifery Council (interfaces with ESR)	Midwives Nurses Nursing Associates
General Dental Council (interfaces with ESR)	Dental practitioners Dental Nurses Doctors Specialty Registrar Dental Dental Orthodontics Dental Hygienist Dental Technician
General Pharmaceutical Council  British Orthopaedic Association (BOA)  Registration Council for Clinical Physiologists  British Association for Counselling & Psychotherapy  The National Counselling Society  General Optical Council (GOC)	Pharmacists Pharmacy Technicians  Technicians (British Casting Certificate)  Audiologists & Technicians / Healthcare Scientists  Counsellors, Nurse Psychotherapist and Therapist  Counsellors  Optometrists Dispensing Opticians Student Opticians OR HCPC

Physician Associate Managed Voluntary Register ( <b>PAMVR</b> )	Physicians Associates
Society of Radiographers (SOR)	
Other – Register of Clinical Technologists	Specialist Healthcare Science Practitioner
Social Work England	Social Workers although currently found in Unscheduled Care Service Manager Patient Flow

- 2.2 All employees within the above staff groups, including employees in honorary, temporary (i.e. acting up, contractors and agency), internal secondment, locum and relief appointments must have valid up-to-date professional registration in order to practise within the Trust.
- 2.3 Employees working within SaTH on a secondment basis from another Trust should be recorded within the Trust’s Electronic Staff Record (ESR) database using an honorary contract to allow their professional registration to be monitored (refer to HR15 Policy for Secondments).
- 2.4 For all medical staff, standards and procedures for verification of professional registration and licensing arrangements must comply with GMC guidance (as set out in Appendix A) in addition to this policy.

### **3 Responsibilities**

#### **3.1 Trust Board**

The Trust Board by overseeing this policy ensures all employees who are required to hold professional registration with an appropriate regulatory organisation maintain and update their valid professional registration in order to practise within the Trust.

#### **3.2 Managers**

All Directors and Managers are responsible for the implementation of this policy. Managers are responsible for regularly monitoring the professional registration status of their employees to ensure compliance with this policy.

#### **3.3 Workforce Directorate**

The Director of People and OD has overall responsibility for this policy. The Director of People and OD is responsible for providing support and guidance to employees and managers on the implementation and application of this policy, updating it as required.

#### **3.3 Employees**

- 3.3.1 It is the responsibility of every employee who is required to be registered with a regulatory body to ensure they maintain their professional registration. Employees are advised to process all registration documentation as early as possible to prevent administrative delays.
- 3.3.2 Failure to be registered or hold a registration (where required) or failure to renew registration may result in action being taken under Disciplinary Policy or Handling Concerns about for Doctors and Dentists (as appropriate). (Refer to Section 6 for additional information). An employee must inform their line manager if their registration lapses for any reason and what action they are taking to remedy the situation.

3.3.3 Responsibility for confirming employees working directly or undertaking work for the Trust are appropriately registered is as follows:

<b>Staff Group</b>	<b>Management Responsibility</b>
Doctors and Dental Practitioners	Medical Recruitment Team
All other staff groups	<p>During the recruitment process, the Recruitment Team will verify and validate any professional registration required for the position.</p> <p>During an employee's employment with the Trust, the Workforce Assurance Team will monitor and report for the professional bodies that are held within ESR.</p> <p>Any registrations due to expire or have expired will be reported to the following positions:                      General Pharmaceutical Council - Director of Pharmacy</p> <p>Nursing and Midwifery Council - Divisional Director of Nursing and the Lead Nurse for Workforce.</p> <p>Health and Care Professions Council Divisional - Director of Operations</p> <p>Other professional registrations – department manager</p>

#### **4 Records**

- 4.1 The Trust will use the ESR database to maintain a record of positions that require an employee to hold a professional registration. This information is used to identify any employees whose registration is due to expire or is showing as having expired.
- 4.2 The Trust uses a rostering programme that also records professional registrations and in the departments where the rostering programme has been introduced this system can be used to view an employee's professional registration.

#### **5 Procedure for verification**

##### **5.1 On appointment**

- 5.1.1 Proof of professional registration is not proof of identity and appropriate checks must be made (see also HR33 Recruitment and Selection Policy) to ensure the professional registration being confirmed matches the details of the employee presenting it.
- 5.1.2 For all appointments to positions requiring professional registration (including external appointments and secondments from other Trusts, internal promotions, transfers and internal secondments), all offers of employment must be subject to proof of current valid professional registration. The Recruitment and Medical Recruitment Teams will check professional registration for employees who require a professional registration during the recruitment process.

## **5.2 During Employment**

- 5.2.1 The Nursing & Midwifery Council (NMC), the General Medical Council (GMC), the General Dental Council and Health and Care Professions Council interface into ESR to update renewals and expiry dates on a daily basis for all professionally registered employees.
- 5.2.2 Any mismatches in details of registrations are notified to the Trust from the General Medical Council (GMC), the General Dental Council and Health and Care Professions Council interfaces into ESR. The Workforce Assurance Team will work with the relevant manager to ensure the employee's position and details are correct.
- 5.2.3 Each month the Workforce Assurance Team will check all other professional registrations (non-interfacing with ESR) on the relevant professional website and update any expiry dates showing within ESR that are due to expire or highlight any missing information.
- 5.2.4 The Workforce Assurance Team will notify the responsible manager, as detailed in the table above (see 3.3.3) and the HR Team, of employees whose professional registration has expired or is due to expire. For registrants of the NMC, the relevant Divisional Director of Nursing will be informed together with the Lead Nurse for Workforce and will be discussed at the following Nursing & Midwifery meeting to ensure the appropriate actions have been taken by the individual's Matron.
- 5.2.5 Monitoring reports, generated by the Workforce Assurance Team, are designed to provide an overview of the status of professional registrations in the Trust and to act as an additional safeguard but should not be relied upon to maintain professional registrations. Employees are responsible for maintaining their professional registration and their manager is responsible for ensuring no employee works with a lapsed professional registration.
- 5.2.6 For the professional registration bodies that interface with ESR (General Medical Council (GMC), the General Dental Council and Health and Care Professions Council), employees with an nhs.net email account should receive a notification 90 days in advance of the renewal date of their professional registration. Employees with an ESR Employee Self Service account will also receive a notification 90 days in advance of the renewal of their professional registration.
- 5.2.7 Department Managers are responsible for ensuring their employees have an up to date professional registration.
- 5.2.8 The Medical Recruitment Team is responsible for confirming that an employee's professional registration has been renewed on or before the expiry date.

## **6 Action if registration cannot be confirmed**

- 6.1 Employees who have an expired professional registration must not continue to practise in their professional role.
- 6.2 Where a professional registration is not valid the employee's manager will need to contact the HR Team to identify an appropriate course of action to remedy the situation.
- 6.3 Where it is not possible to confirm that an employee's professional registration is valid, the employee will be responsible for updating their registration without delay.
- 6.4 During this period, an employee will be restricted to non-clinical duties, although it is recognised that such duties may not be available or may only be available for a short period.
- 6.5 Where alternative duties cannot be identified, there are several options that may be considered. These options include taking annual leave accrued up to the date of the



employee's professional registration expiring; unpaid leave, or alternative duties at the appropriate rate of pay for the unregistered role. The employee's manager, with support from the HR Team, should meet with the employee to agree the most appropriate option. Suspension from duty should be avoided wherever possible.

- 6.6 The employee's manager should confirm in writing to the employee the option to be taken and the manager is responsible for informing Pay Services, the Workforce Assurance Team and their Divisional Director.
- 6.7 If an employee's professional registration cannot be renewed in a timely period, their line manager, with support from the HR Team, will meet with the employee to review their position. The outcome from the meeting may include continuing with the temporary arrangements until which time the professional registration is renewed or to consider alternative options, including the relevant Disciplinary Policy where necessary. In such instances, an employee without a valid registration cannot work in their professional role and alternatives should be considered as appropriate (see 6.5)
- 6.8 Where an employee has practised clinically without knowing their professional registration had expired, their line manager should prevent the employee from working in their professional role whilst further information is gathered. Depending on the circumstances, further investigation and action may be required in accordance with the Disciplinary Policy as appropriate to the situation.
- 6.9 Where an employee has practised knowing their professional registration has expired (e.g. after being reminded of the need to renew their professional registration), the Trust disciplinary policies may be utilised dependent on the circumstances involved. In such instances, the employee working without professional registration cannot work in their professional role and alternatives should be considered (see 6.5)

## **7 Agency, Locum and Bank Staff**

- 7.1 Where agency, locums, or Bank workers (who are required to have a valid professional registration) are used within The Trust, their professional registration details must be verified. For workers who are sourced through an agency, it is the agency's responsibility to ensure those workers they are supplying have an up to date professional registration and provide evidence to the Trust before they start work.
- 7.2 Agency and locum workers sourced through agencies listed on the Health Trust Europe (Total Workforce Solutions II) framework are required to carry out the appropriate checks before supplying workers to The Trust.
- 7.3 The Trust is legally liable for ensuring agency and locum workers who require professional registration working on Trust premises are appropriately qualified and registered to do so. The Temporary Staffing Department check all registrations on submission of the agency worker checklist, recorded within the Bank Staff programme and audited annually.
- 7.4 The Temporary Staffing Department will request an annual audit report to provide assurance professional registration checks are being carried out by the agencies used through the Health Trust Europe (Total Workforce Solutions II). However, if necessary The Trust can request at any time an audit to be completed through the framework agreement.
- 7.5 Should the Trust use an Agency that is not recorded within Health Trust Europe (Total Workforce Solutions II) framework to source agency workers, it is the responsibility of the

appointing manager to ensure the agency has taken all reasonable action to ensure the worker supplied is suitably qualified and has in-date current professional registration and a licence to practise (where applicable).

- 7.6 All agencies are required to supply to The Trust verification that pre-employment checks have been successfully completed prior to placement of workers within the Trust; in accordance with standards set out within the Health Trust Europe (Total Workforce Solutions II) framework.
- 7.7 Where workers are sourced through the Trust's Temporary Staffing Department, or are registered as Bank workers, it is the responsibility of the worker to provide evidence of their current professional registration. The Temporary Staffing Department will receive notification each month from the Workforce Assurance Team of workers registered with the Bank, whose professional registrations are about to expire or have expired. A Bank worker cannot apply for a duty if their professional registration has expired.
- 7.8 An Agency supplying a worker outside of the Temporary Staffing Department's operating hours; 07:30 – 20:00 (seven days a week), it is the responsibility of the Clinical Site Management Team to confirm the worker has a valid and relevant professional registration. The Temporary Staffing Department or Medical Staffing Team, as appropriate, will contact the provider for a checklist the following day.
- 7.9 Agencies are required to supply the Temporary Staffing Department with a completed checklist for each agency worker the first time they are used within the Trust (which confirms details such as personal details, DOB, DBS check, NMC PIN, professional registration expiry date and training information). The Temporary Staffing Department will confirm an agency worker's professional registration by accessing the website for the appropriate Professional regulatory body.
- 7.10 All Agency workers must be sourced through the Temporary Staffing Department. However, managers who contract directly with an Agency to source an agency worker where professional registration is required, they are responsible for ensuring the agency worker has the appropriate and valid professional registration and they must inform the Temporary Staffing department.
- 7.11 Bank only workers sourced by the Temporary Staffing Department Bank, must be validated in accordance with HR33 Recruitment & Selection policy using the Recruitment Checklist, which includes the verification of their professional registration.
- 7.12 Clinical Site Managers are able to check the professional registration of Bank only workers who are required to attend work (outside of the Temporary Staffing Department's operating hours) by accessing the Temporary Staffing Department's roster software programme which contains the details of all registered workers with their PIN and expiry dates.

## **8 Training**

- 8.1 There is no mandatory training associated with this policy. If employees have queries about its operation, they should contact the Workforce Advisory Team in the first instance.

## **9 Equality Impact Assessment (EQIA)**

- 9.1 The policy applies to all employees and workers who require professional registration in order to carry out the duties for which they are employed.

## 10 Process for monitoring compliance

Aspect of compliance or effectiveness being monitored	Monitoring method	Responsibility for monitoring (job title)	Frequency of monitoring	Group or Committee that will review the findings and monitor completion of any resulting action plan
Duties of the key individual(s) for risk management activities	<i>To be addressed through the monitoring below</i>			
Process for ensuring registration checks is made directly with the relevant professional body, in accordance with their recommendations, in respect of all permanent clinical employees both on initial appointment and ongoing thereafter	Capture and analysis of ESR BI reports  Where interfaces exist (GMC/NMC) for medical and dental staff  See flowchart in policy on a page	Workforce Assurance Team	Monthly for GMC/NMC GDC registrations – interface to ESR automatic upload daily Annually for HPC registrations – defined by set dates for each profession Annually for RPSGB	Operational Management Group
Process for receiving assurance that registration checks are being carried out by all external agencies used by the Trust in respect of all temporary clinical workers	Review of Buying Solutions Audit Report	Temporary Staffing Department / Medical Recruitment Team	Annual	Operational Management Group
Process in place for following up those permanent clinical employees who fail to satisfy the validation of registration process	Capture and analysis of ESR Reports where interfaces exist (GMC/NMC) for medical and dental staff. See previous comment  See flowchart in policy on a page	Temporary Staffing Department / Medical Recruitment Team	Monthly for GMC/NMC GDC registrations – interface to ESR automatic upload daily Annually for HPC registrations – defined by set dates for each profession Annually for RPSGB	Operational Management Group

- 10.1 If, as a result of monitoring this policy action is required; recommendations and plans to resolve any identified issues will be developed and form part of future reports to ensure compliance.

## 11 Review Process

- 11.1 The Trust will review this policy every three years, unless there are significant changes at either national policy level, or locally. In order that this document remains current, any of the appendices to the policy can be amended and approved during the lifetime of the document without the document having to return to the ratifying committee

## 12 References

NHS Employers Checks – January 2021

## **Appendix A GMC Registration– General Information**

Any doctor wishing to practise medicine in the UK will by law, need to be registered and hold a licence to practise. All doctors employed by the Trust must be appropriately registered with the General Medical Council.

### **TYPES OF REGISTRATION**

#### **Full Registration**

Doctors must have full registration for unsupervised medical practise in the NHS or private practise in the UK. Consultants must also be entered on the GMC Specialist Register for the specialty in which they work. All doctors will need to hold both current registration with the GMC and a current licence to practise.

#### **Provisional Registration**

Provisional registration allows newly qualified doctors to undertake the general clinical training needed for full registration. A doctor who is provisionally registered is entitled to work only in a programme for provisionally registered doctors, currently Foundation Year 1 (FY1).

#### **Specialist Registration**

All consultants (except locum consultants) must be entered on the GMC Specialist Register. It is not possible to hold specialist registration without also holding full registration.

#### **Temporary Full Registration**

In certain cases, doctors may be granted temporary full registration if they are coming to the UK to provide specialist medical services for a short period, for example to demonstrate a specialist procedure.

#### **Locum Doctors**

All doctors employed by the Trust as locums must have appropriate registration.