Leicestershire Partnership NHS Trust

Professional Registration Policy

This policy sets out the process and responsibilities for ensuring that professional staff hold current registration upon appointment and maintain their registration during their employment with the relevant regulatory body. It also outlines the consequences of failing to maintain registration or loss of registration.

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Policy on a page

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Please note that this is designed to act as a quick reference guide only and is not intended to replace the need to read the full policy.

Summary and aim

This policy is designed to provide guidance for employees and temporary workers at Leicestershire Partnership NHS Trust (LPT) in respect of professional registrations.

It aims to ensure all managers and staff are aware of their roles in:

- Ensuring anyone working in a registered role has the correct professional registration.
- Ensuring they maintain it during their work.
- Are clear on what action needs to be taken if their registration lapses.

Target audience

All LPT employees and temporary workers.

Training

In addition to the Policy, training and support can be accessed via the HR Advisory Team

Key requirements

- All employees and temporary workers who are carrying out a registered role for LPT are required to maintain their professional registration.
- All prospective employees should provide evidence of their registration to the Recruitment team where required for the role.
- All temporary workers will have their professional registration checked by LPT (Bank workers), their agency or Medical Staffing (Locum workers).
- Anyone working in a role which requires a professional registration should ensure this is maintained during their employment. If they choose to allow it to lapse during any periods of absence, they should discuss this with their line manager.
- Where an individual's registration lapses, they will be unable to carry out their role and they will be required to take unpaid leave, annual leave or in exceptional cases may be allowed to be temporarily redeployed to a non-registered role. Lapse of registration may result in Disciplinary action being taken in line with the Trust's Disciplinary Policy and Procedure.
- Any cases of lapsed registrations will be reviewed by a Lapse Panel with the relevant lead professional.

1.0 Introduction and Purpose

This policy provides clear guidance on the Trust's standards and procedures in place to ensure that all professional registrations are appropriately checked and maintained, both upon commencement of employment and on an ongoing basis throughout employment.

This policy describes the process and responsibilities for ensuring that where relevant, all professional staff and workers working in the Trust hold and maintain their professional registration during their employment.

It outlines the consequences of failing to maintain registration or loss of registration and action to be taken by managers and Human Resources (HR).

The Professional Registration Policy applies to all prospective employees, trainees and workers employed by or engaged to work with the Trust who are required to be registered with a professional body to carry out the role in which they are employed/engaged.

It applies to all permanent and temporary staff and includes bank staff, students, trainees, locums, honorary appointments, contractors, mobile staff, staff supplied by an agency and staff on secondment.

Where there are concerns relating to a registrant's fitness to practise, the Trust must consider referral to the relevant professional regulator, in line with the Referral of a Registrant to a Professional Regulator Policy, regardless of employment status, sickness absence or registration status.

2.0 Policy Requirements and Objectives

As part of the Trust's responsibility to protect the public and to meet the NHS Employment standards and regulation, it is essential that upon appointment professional staff hold current registration with the relevant regulatory body and maintain their registration during their employment.

Staff undertaking work which requires professional registration are responsible for ensuring that they are registered and that they comply with any codes of conduct applicable to that profession. Failure to maintain registration or loss of registration may result in disciplinary action being taken in accordance with the Trust's Disciplinary Policy and Procedure.

This policy is subject to variation from time to time due to changes in employment law, NHS Employment standards and regulation, and professional regulations.

All staff should act in accordance with our Trust leadership behaviours for all and be able to evidence adherence in situations that involve professional registration. A fundamental approach to developing our Leadership behaviours for all is our ability to both give and receive feedback in a positive and insightful way. The feedback method is based on defining; Context, Understanding, Behaviour and Effect (CUBE).

All registered professionals should act in accordance with their regulator's professional standards of practice (e.g., NMC Code – nurses and nursing associates) and as a professional are accountable and responsible for their actions and decisions, and to those who they delegate to.

3.0 Process

3.1 Non-Regulatory Bodies

Certain posts may require either professional qualifications or registration with non-regulatory bodies, such as the Chartered Institute of Management Accountants (CIMA), Chartered Institute of Public Finance and Accountancy (CIPFA), Charter Institute of Personnel and Development (CIPD), British Association for Behavioural and Cognitive Psychotherapy (BABCP) and UK Society for Behaviour Analysis (UKBA) to perform the duties required. Where this is the case, this will be identified on the person specification and such qualifications and registrations requirements are therefore covered by this policy. Renewal criteria will be as per professional body requirements.

Additional information regarding Psychological Professions can be found on the Professional Registration StaffNet page.

3.2 Procedure for Pre-employment and Post-employment Registration Checks

A flowchart outlining the procedure for monitoring of professional registration checks is included in Appendix 2.

3.3 New Appointments

As part of the NHS Employment Check Standards and in line with the Trust's Recruitment Policy, professional registration details for all prospective employees and workers joining the LPT Bank will be checked at recruitment stage by the Resourcing Team who will take copies of evidence of any professional registrations necessary for the role.

Professional registration details provided at interview stage to the recruiting manager will be checked by HR for preferred candidates (substantive staff and Bank worker) with the relevant professional body. This will be done using the online verification service prior to any unconditional offer of employment being confirmed by HR (Recruitment Team or Medical Staffing). A copy of the online verification will be kept in the employee's/worker's personal file.

Candidates awaiting confirmation of their final examination results will only be employed or appointed as a registered practitioner once they have obtained the relevant professional registration and this has been checked by their manager/HR team. If appropriate, the candidate/employee will be recruited to undertake duties which do not require their new professional registration. They will be paid in accordance with the role that does not require the new professional registration until they have received confirmation of their new registration, and this registration status has been verified by their manager/HR team. Staff are expected to inform their manager as soon as they receive confirmation that their PIN status has changed, so that their manager can assure themselves that the PIN is now in place - until the manager has undertaken this assurance check, the employee cannot work in the role that requires the new registration. Failure to secure confirmation of their registration and PIN number within 3 months of starting with the Trust may lead to the termination of contract unless there are exceptional circumstances.

The hiring manager should notify the Assistant Director for Nursing & Quality of any conditions of practice identified at the Recruitment Stage. These will be considered by the Assistant Director for Nursing & Quality, recruiting manager and clinical lead prior to any offer of employment being made.

3.4 Existing staff

Employees need to ensure that documentation and/or fees are submitted before their due date, or their registration will automatically lapse, and they will be unable to practice. Refer to section 3.6 & 3.12.

Should an employee's registration lapse, the only way to re-register will be by applying for readmission to the register with their relevant professional body. This process is not within the control of the Trust as it is reliant upon the professional body to enact.

One month prior to the expiry of an individual's registration, and where the registration has not yet been renewed, the Workforce Information Team will provide a monthly professional registration report to the HR Operational Team. This report identifies all employees who are in date with their registration, registration due to expire or registration that has expired.

HR will notify the employee and the line manager of the employee whose registration has expired/is due to expire. The possible actions that a manager may need to take in relation to the employee are included in the notification email. N.B. Employees should not delay acting in respect of their registration pending an email from HR or management.

If an employee fails to renew their registration or loses their registration their manager must seek immediate advice from HR and act in accordance with Section 3.6, 3.12 and Appendix 2.

The system does not allow booking of a bank worker onto shifts if the registration has expired or for shifts which fall after an expiry date.

Where an existing staff member has conditions of practice, any changes to these should be escalated to the HR advisor for their area and the Assistant Director of Nursing and Quality.

3.5 LPT Temporary Workers – Agency, Locum

Where Government Procurement Service Framework Agreements, or Framework Agreements provided for NHS use by other agencies are used for the supply of registered nurses and other professionals, the Centralised Staffing Solutions (CSS) team is responsible for confirming that the contract requires the provider of agency staff to check that individuals' registration with their regulatory body is up to date. This will be audited as part of the contract. Expectations regarding professional registration of registered nurses and other professional will be communicated to Agencies by the Trust. It will be expected that their compliance regarding professional registrations of their supply of registered nurses and other professionals will be integral to maintaining their status with the National Procurement framework.

For medical staff (i.e. doctors), the medical staffing team will verify professional registrations of all medical locums using the online verification service of the regulatory body before the individual starts working on a shift. Confirmation must always be provided by the agency to the medical staffing team as to the level and type of registration of the doctor.

If it becomes necessary to use a non-contracted agency for the supply of temporary registered nurses and other professionals, the Centralised Staffing Solutions Team is responsible for ensuring that prior confirmation is requested in writing from the agency verifying that they have undertaken all the pre-employment checks, including registration checks. Expectations regarding professional registration of all professionals will be communicated to Agencies by the Trust.

3.6 Failure to Maintain / Non-renewal / Lapsed Professional Registration

It is unlawful for staff in the groups listed in Appendix 3 to practice if they do not hold an up-to-date registration for the position in which they are employed. The Trust reserves the right to invoke its Disciplinary Policy and Procedure in respect of failure to maintain registration.

When it has been identified that an individual has been working whilst their registration has lapsed, managers are required to report this incident, please refer to the Trust Incident Reporting Policy

Any member of staff who fails to renew/maintain their registration or loses their registration will not be allowed to practice as a registered practitioner and this will be treated as a breach of their terms and conditions of employment. This will not be dealt with as a disciplinary issue if the staff member is able to evidence attempts to renew but there has been an administrative failure by the professional body.

If the staff member is at work, they will be stopped from working and given time to renew their registration during their shift. If not at work, the individual should take steps to renew their registration without delay. In both instances, evidence of application for re-registration should be provided to management within 24 hours. If this is not possible, the individual should inform their line manager of the reasons why, the manager will then notify the appropriate Lead Professional and HR advisor.

Where a lapsed registration exceeds the initial 24-hour period, the employee's line manager must arrange a meeting with the appropriate lead Professional i.e., Director of Nursing team and the HR advisor for the area to consider the following options:

- Working in a temporary non-registered role pending re-registration (please note this option does not apply to medical staffing).
- Annual Leave
- Unpaid Leave
- Referral to Disciplinary Policy & Procedure (or another appropriate procedure).

A summary of the actions should be clearly documented and circulated following the meeting.

The line manager will request the individual to complete Appendix 4 and submit to their assigned HR advisor and the Professional Standards team. Where necessary, the manager may support the employee to complete Appendix 4. If the manager is unable to meet with the individual to complete Appendix 4, they should complete in the employee's absence and submit to their assigned HR advisor and the Professional Standards team. The case will be reviewed by the next Lapse Panel meeting.

3.7 Working in a temporary non-registered role

In extenuating circumstances, a decision may be authorised by the appropriate Lead Professional to allow an individual to work in a non-professional (unregistered) position for an agreed length of time which may be at a lower band than their substantive role. In this case, pay will be adjusted accordingly and with immediate effect. This role may include areas other than their normal place of work. This option applies for Agenda for Change staff only.

After a maximum period of one month following the expiry of registration, if the individual is still not registered then a meeting will be reconvened with their line manager, Lead Professional and HR advisor for the area to review the progress and determine next steps. The outcome of this could be continuation in a non-registered role or referral to the

Disciplinary Policy & Procedure. The outcome of this meeting will be fed back to the employee and escalated to the PSLG.

3.8 Unpaid Leave or Annual Leave

Where an individual's registration lapses, the Trust will consider the alternative employment arrangements that may be appropriate. Depending on the circumstances, this may include a period without pay, or as alternatives, annual leave or temporary redeployment to suitable duties that do not require a professional registration.

Any decision that the employee will not receive pay will not be applied automatically. The decision will be based on consideration of the statutory requirements of the role to hold the registration, and of the employee's individual circumstances. Once registration is regained, there will be no reimbursement for unpaid time, annual leave taken or hours worked at a lower pay. This applies to Agenda for Change Staff and Medical Staff.

3.9 Referral to Disciplinary Policy & Procedure

Deliberate or unreasonable failure, by the employee, to re-register may lead to disciplinary action being taken.

Where the employee has a loss of registration required to fulfil their role (either permanently or long-term), they will be referred to the Disciplinary Policy & Procedure (or another appropriate procedure) following review by the appropriate Lead Professional, HR and manager/clinical lead/matron.

Consideration of referral to professional body will be in line with the Referral of a Registrant to a Professional Regulator Policy and Procedure

3.10 Actions following re-registration

Following re-registration, staff will commence their duties in line with their substantive/temporary worker post on the date evidence of successful registration is provided to the Trust from the regulatory body. The line manager should consider the support required to enable a return to the employee's registered role where appropriate.

3.11 Revalidation

Each professional body outlines the requirements for their revalidation, please refer to their websites for further information and Appendix 3.

For staff that work in the Trust through an Agency, proof of revalidation will be requested through the contracted agency providing nursing staff. The Trust will have no obligation to act as confirmers for Agency workers.

It is the responsibility of the registrant to contact their professional body at the earliest opportunity if they do not expect to be able to meet revalidation requirements. They must ensure that they keep their line manager is informed of their circumstances.

Where a NMC registrant is not satisfied with the confirmer's assessment or the confirmer has doubt whether the registrant has met the requirements, a request for a review must be lodged within 14 calendar days of the date of confirmation. A review will be undertaken by a member of the Director of Nursing team within 21 calendar days. There will be no further right of review.

3.12 Lapse Panel

All cases of lapsed registration (except for medical staff) will be referred to the Lapse Panel which will consist of:

- HR Representative

- An appropriate professional lead i.e., Head of Nursing/Deputy Head of Nursing/Lead AHPs/Medical Director/Associate Medical Director/Head of Service (for non-clinical areas) (as appropriate).

The role of the panel will be to review the case and determine a plan of action for the employee, which may include a recommendation that action will be taken in accordance with the Trusts Disciplinary policy and procedure. The purpose of the review of lapsed registrations is to ensure consistency in dealing with cases.

3.13 Bogus certificates or use of bogus names

If a member of staff is found to have submitted a bogus certificate or is found to have used another person's name and certificate, this will be reported to Counter Fraud for investigation in line with the Trust's Counter Fraud, Bribery and Corruption Policy and appropriate action will also be taken in line with the Trusts Disciplinary Policy and Procedure. Managers should report concerns to HR to seek advice.

3.14 Maintaining Registration during periods of paid or unpaid leave from the Trust

It is the responsibility of the employee to ensure their registration is maintained throughout any periods of leave (paid or unpaid) from the Trust such as sickness, maternity, special leave etc. The employee remains contractually bound by their terms and conditions of service whilst on leave from their employment. If the employee encounters any difficulties in maintaining their registration during any period of leave, they should raise with their line manager at the earliest opportunity.

Employees who wish to take a career break may choose to allow their professional registration lapse whilst on career break, the employee should seek guidance from their professional body around this. However, in accordance with the requirement of the LPT Career Break scheme, it is the employee's responsibility to ensure that they take the necessary steps to being registered prior to their return to work. If, whilst on career break, the employee is required (where practicable) to undertake a minimum of 10 days paid work annually for updating purposes, it is the employee's responsibility to ensure that they take whatever action is necessary during their career break to maintain their professional registration so that they can participate in the requirements of the LPT Career Break scheme.

Employees returning from career break must ensure their registration is in date on their return to work, in line with Section 3.4.

3.15 Multiple Registrations

Those registered through completing one education program that includes more than one field of practice are dual field registrants, and therefore only have to register once.

Those that are registered under more than one field of practice through a different education programme for each are dual registered and therefore have to register for each field of practice i.e. midwife/Nurse, Registered Nursing Associate/Registered Nurse, RGN/RMN.

To revalidate, everyone on the NMC register must demonstrate that they have undertaken a minimum number of practice hours relevant to their scope of practice. To meet the practice hours requirement to maintain their registrations, people with multiple registrations must have undertaken a minimum of 450 hours for each registration over the three-year period since their registration was last renewed or they joined the register.

The other revalidation requirements are the same for people with multiple registrations as for people who only have one registration. For example, people with multiple registrations

will only have to obtain a total of five pieces of practice-related feedback and write five reflective accounts.

3.15.1 Dual registrant practising in two different roles (not including dual field registrants)

If staff have been practising as a dual registrant in two different roles since their last renewal, either at the same time or at different times during that period. They must undertake a minimum of 450 hours of practice in each of the roles (900 in total), recording each role separately, with separate practice hours and evidence for each.

3.15.2 Dual registrant practising in one role (not including dual field registrants)

If you have practised as a dual registrant in just one role since your last renewal you will need to use your professional judgment to decide whether you are relying on both your registrations in that role, or if you are only relying on one of your registrations. This will not depend on the title of your role, but on the actual practice you are doing.

Some dual registrants will be working in a role where they cannot demonstrate that they are relying on both registrations.

Example: If registered as both a Children's and Mental Health Nurse working solely as a mental health nurse for the last three years. Completion of revalidation application should specify mental health nursing as your scope of practice. You cannot select any individual tasks undertaken as part of your practice as a mental health nurse to maintain your children's nurse registration.

Some dual registrants will be working in a role where they can demonstrate they are relying on both registrations.

Example: if working as a mental health nurse and using your registered general nurse skills regularly, in addition to relying on your mental health nursing skills. If you can demonstrate you are relying on both nursing fields of practice knowledge, skills and experience in this role, then you can renew both registrations. You will still need to declare a minimum of 900 hours – at least 450 hours for general nursing and at least 450 hours for mental health nursing – and you cannot double-count these hours.

It is the responsibility of staff to use their own professional judgment to ensure their registration with the NMC properly reflects your current scope of practice.

3.15.3 SCPHNs and other additional qualifications

Registered nurses and midwives can complete a post-registration qualification which leads to an additional entry in the part of the register for Specialist Community Public Health Nursing (SCPHN). SCPHNs must maintain their registration as a nurse or a midwife and cannot renew their registration only as a SCPHN. Registered nurses and midwives can also gain additional qualifications such as a Specialist Practice Qualification (SPQ) or a prescribing qualification which are recorded on our register.

SCPHNs and people on our register with additional recorded qualifications do not need to complete any additional requirements for their revalidation application. Their revalidation

application should relate to their most current or most recent scope(s) of practice. For example, if a nurse practises solely in a SCPHN role, their revalidation application will relate to their scope of practice as a SCPHN.

3.15.4 A nursing associate who is undertaking a nursing programme

Registered nursing associates can undertake a pre-registration nursing programme to become a nurse. There is no NMC requirement to maintain registration as a nursing associate during the period on the 'top up' programme. However, as a Trust we would recommend the nursing associate registration is maintained. Individuals can revalidate their nursing associate registration whilst undertaking the nursing programme if they can meet all the requirements for revalidation in a nursing associate role.

Individuals will not be able to use their nursing training hours to maintain their registration as a nursing associate. If they cannot meet the requirements to revalidate their nursing associate registration (for instance because they have not practised as a nursing associate in the last three years) they will need to let their nursing associate registration lapse.

3.16 Death in Service

In the event of a Death in Service of an employee of the Trust who holds a professional registration, it is the responsibility of the service lead/manager to inform the Director of nursing, AHPs and quality/Assistant Director of Nursing and Quality.

The Assistant Director of Nursing and Quality will contact the professional's regulator to inform them of the death in service, providing any details and actions requested.

3.17 Removal from a professional register by registrant

Each professional body has their own arrangements for registrants requesting to remove themselves from the register if they are subject to fitness to practise proceedings, which can be found on their websites.

If an employee submits a request for removal from a professional register, a meeting will be convened with the service lead/manager/Matron, Assistant Director of Nursing and Quality and Human Resources. This meeting will consider the job description and terms and conditions of the individual's employment and agree a way forward referring to the Disciplinary Policy & Procedure.

3.18 Registered professionals working in non-registered posts

The Trust does not allow employees holding a professional registration to work in a non-registered post (except in circumstances outlined in Section 3.7). For example, a qualified nurse is unable to work on the bank as a Healthcare Support Worker. This does not apply to staff who are registered outside of the UK, and do not hold a professional registration in the UK.

Where a staff member obtains a registration whilst employed in a non-registered role, they have a duty to inform their line manager (or LPT Bank) at the earliest opportunity.

This is due to:

- Registered professionals working in non-registered roles remain professionally accountable for their actions and therefore would be bound by their professional codes and standards regardless of whether they were working in a professional capacity.
- The risk of a registered professional carrying out registered duties/being asked to undertake registered duties whilst working in a non-registered role.
- To ensure clarity of roles and responsibilities for patients, service users, families and other staff.

3.19 Conditions of Practice

Where an employee has conditions of practice recorded or applied to registration status by their professional body, the employee needs to advise their line manager immediately.

The manager must escalate this to the HR advisor for the area for further advice and guidance. In addition, please refer to the 'Referral of a Registrant to a Professional Regulator Policy' for further guidance.

4.0 Roles and Responsibilities

The Trust Board has a legal responsibility for Trust policies and for ensuring that they are carried out effectively.

The Trust People and Culture Committee has the responsibility for adopting this policy.

The Trust will ensure that it has systems in place to check the professional registration status of staff prior to and during their employment and to identify any lapsed registrations and take appropriate action.

4.1 Directors and Heads of Service are responsible for:

- Ensuring that arrangements are in place regarding adherence to this policy and how this policy is applied within their own area of responsibility.
- Ensuring that team managers and other management staff are given clear instruction about the policy arrangements so that they in turn can instruct staff under their direction.

4.2 Managers and Team Leaders are responsible for:

- Ensuring that registered healthcare professionals renew their registration and complete revalidation as directed by their professional body.
- Communicating to their teams, the importance of always maintaining professional registrations.
- Act upon all notifications from ESR and HR regarding expiring registrations in a timely manner.
- In the event of lapsed or non-renewal of registration for a professional, meet with the employee to establish and record the circumstances surrounding the issue. Advice should be sought from HR to agree the appropriate course of action as well as Appendix 4 should be completed and forwarded to the Professional Standards team (see Section 3.6) for the case to be reviewed at Lapse Panel and determine an appropriate plan of action for the employee concerned.
- Notifying the Professional Standards team of any professional conditions of practice identified at Recruitment stage for consideration.
- Any requests for information from the Professional Standards team should be responded to in a timely manner.

4.3 Registered professional employees (and applicants for employment including seconded staff) are responsible for:

- Always adhering to this policy.
- It is the responsibility and contractual obligation of all employees (and applicants seeking employment with the Trust) requiring a professional

registration, to maintain their registration and revalidation throughout their employment with the Trust and to notify their manager in the first instance any issues affecting their registration/revalidation, or any restrictions placed upon their practice.

- It is the responsibility of all employees (and applicants seeking employment with the Trust) requiring a professional registration to ensure you are registered in the same name that you practice in, and that the registration is relevant for the role in which you are seeking employment for/are employed in. This is to help patients, the public, and employers to find the right information about your registration.
- All employees requiring professional registration must complete all appropriate forms correctly and submit with payment to the professional body prior to the date of expiry. Staff making a payment to the professional body does not mean renewal of registration and does not provide evidence of such. It is the professionals own responsibility to receive confirmation of registration from the professional body.
- Any requests for information from your line manager should be responded to in a timely manner.
- If the member of staff is experiencing any financial difficulties with paying their registration payments, they should they bring this to the attention of their manager as a matter of urgency so that meaningful conversations can be had to help that member of staff resolve the issue.
- Failure to maintain registration or loss of registration for a registered post will be treated as a breach of professional contractual terms and conditions.

4.4 The Human Resources Department is responsible for:

- Ensuring that notification is provided to the relevant managers with regards to an expected expiry of registration 1 month in advance of expiry.
- Checking the registration details of new starters prior to issuing an offer of employment and provide evidence of this as a way of assurance.
- Providing expert advice with regards to the appropriate action to be taken because of lapsed / potential lapses in professional registration and any subsequent action that should be taken as a consequence.

5.0 Implementation and Training

This policy is applicable with immediate effect within the Trust, from the date that it is published on the intranet. The HR advisors will support managers when using the policy. Human Resources will make Trust staff aware of this version of the policy through the Trust e-newsletter. There is a need for other training needs identified within this policy regarding revalidation confirmers.

Appendix One: Definitions

The Trust: Leicestershire Partnership NHS Trust

NHS Employment Check Standards: Outline the legal and mandatory checks employers must carry out for the appointment's and on-going employment of all individuals in the NHS across England.

Professional Registration: Registration with the regulatory body.

GMC (General Medical Council): Doctor's registration with the GMC is renewable on an annual basis.

NMC (Nursing and Midwifery Council): Nurses and Midwifery Council. Professional body for nurses, nursing associates, midwives, and specialist community public health.

NMC renewal is on an annual basis. Registered nurses, specialist community public health nurses (SCPHN), midwives, nursing associates are expected to meet the revalidation requirements as set out by the NMC on a three yearly basis. SCPHN have a separate set of standards for renewing registration.

HCPC (Health and Care Professions Council): Practitioners covered by the HCPC are registered on a 2 yearly basis with set expiry dates for practitioner groups. Practitioners covered by HCPC within LPT are Psychologists, Podiatrists, Speech & Language Therapists, Physiotherapists, Occupational Therapists, Dieticians.

GPhC (General Pharmaceutical Council): Registered body for Pharmacists, and Pharmacy Technicians. Pharmacists and Pharmacy Technicians registration must be renewed annually, which involves completing a declaration stating that they meet all GPhC's professional, fitness to practise and ethical standards.

Social Work England: Registered body for Social Workers practicing in England. Professionals must apply to renew their registration annually.

Professional Standards Learning Group (PSLG): An internal LPT meeting consisting of lead clinical professionals.

Lapse Panel: A meeting convened following a lapsed registration comprising of the line manager, a HR representative, and the relevant professional lead. The purpose of the panel is to review the details of the lapse and determine any appropriate actions required.

Revalidation: The process that allows nurses, midwives, SCPHN and nursing associates to maintain their registration with the NMC.

Consent: a patient's agreement for a health professional to provide care. Patients may indicate consent non-verbally (for example by presenting their arm for their pulse to be taken), orally, or in writing. For the consent to be valid, the patient must:

- be competent to take the particular decision.
- have received sufficient information to take it and not be acting under duress.

Due Regard: Having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics.
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people. Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

Appendix Two: Procedure for Administration of Lapsed Professional Regulatory Registration Checks

Step 1: Human Resources (HR) Officer notifies line manager and Project Officer Professional Practice (POPP) and HR advisor of lapse for registration and revalidation and sends **Appendix 4** paperwork to line manager. (In the absence of HR officer, POPP picks up)

Step 2: Line manager for individual completes Appendix 4 paperwork with the individual immediately and advises of their options. * (**Where registration has not been renewed; (Refer to section 9)** Line manager is expected to report as an incident where an individual has worked whilst unregistered. (Refer to Section 10.2 of the Policy)

When it has been identified that a registration has lapsed, and the employee has worked during this period, managers are required to report this incident. Please refer to the Trust Incident Reporting Policy www.leicspart.nhs.uk/wp-content/uploads/2022/01/Incident-Reporting-and-Management-Policy.pdf

CSS: Line manager at the time

Substantive: Current line manager

Step 3: Form to be completed in full and returned to lpt.professionalstandards@nhs.net and HR advisor for area. POPP to add to agenda for next lapse panel meeting or if no panel a virtual panel to be setup with either 1x Professional Lead (i.e. HoN/DHoN/Lead AHP) and a 1x HR representative.

Lapse Panel will consist of:

- **Line Manager**
- **HR advisor**
- **An appropriate professional lead i.e. Head of Nursing/Deputy Head of Nursing/Lead AHP/Lead Medic (as appropriate).**

Complete forms - Will be sent to POPP to add to agenda for next lapse panel meeting or if no panel a virtual panel to be setup.

Incomplete forms - Will be sent back to the line manager to complete in full.

Step 4: Panel meeting / Virtual panel take place and decision is discussed. HoN/DHoN to update line manager / Assistant Director of Nursing / Director of Nursing of decision. Copy of form to be kept in personal file, HR and with POPP.

Step 5: Panel decision shared with individual within 1 calendar month.

Where registration has not been renewed; (Refer to Section 10)

1. **For Agenda for Change staff**, registered professionals will take annual leave or unpaid leave pay until registration is confirmed with appropriate professional regulatory body. In exceptional circumstances, the individual may be temporarily redeployed to a non-registered role determined by the panel.

2. **For Medical Staff,** individuals will take annual leave or unpaid leave until registration is confirmed with appropriate professional regulatory body.

Once registration is confirmed, employee will return to their substantive post (or with temporary workers, as appropriate).

If application to re-register is not confirmed within 24 hours, disciplinary action may be taken in accordance within the Trust's Disciplinary Policy and Procedure

Appendix Three: Professional Regulatory Bodies – Renewals guidance

Staff Group	Professional Regulatory Body	Renewal Details	Notice Employee Receives for Renewal	How the check is carried out by the LPT
Medical Staff	General Medical Council 0161 923 6602	Yearly Renewal date varies by individual	One month prior to expiring	Employees that have a registration on ESR. There is an interface with the GMC and ESR, which provides an email alert of any changes to the employee's registration, such as suspensions/sub parts to employee's registration etc.
Nurses, Midwives, Nurse Associates and Health Visitors	Nursing & Midwifery Council 0207 333 9333	Yearly Renewal date varies by individual	Letter will be sent 60 days prior to expiring	Employees that have a registration on ESR. There is an interface with the NMC and ESR, which provides an email alert of any changes to the employee's registration, such as suspensions/sub parts to employee's registration etc.
Allied Health Professional's i.e., Art Therapist, Occupational Therapist, Physiotherapist, Speech & Language Therapist, Practitioner Psychologists, Dietetics	Health & Care Professions Council 0845 300 4472	Every 2 years	Minimum 6 weeks prior to expiring	Workforce Information run monthly reports from ESR, which lists all expiry dates and highlights those lapsed and due to lapse. Reports sent to HR Advisory Team to inform line manager to take appropriate action.
Dentists, Dental Care Professionals (Dental Hygienists, Dental Therapists)	General Dental Council 0845 222 4141 or 020 7887 3800	Yearly Renewal date varies by individual	Minimum 6 weeks prior to expiring	Employees that have a registration on ESR. There is an interface with the NMC and ESR, which provides an email alert of if any changes to the employee's registration, such as

				suspensions/sub parts to employee's registration etc.
Pharmacists, Pharmacy Technicians	General Pharmaceutical Council 0203 713 8000	Yearly	Letters will be sent out 2 months in advance prior to expiring. 2-3 emails will be sent out within that time	Workforce Information run monthly reports from ESR, which lists all expiry dates and highlights those lapsed and due to lapse. Reports sent to HR Advisory Team to inform line manager to take appropriate action.
Social Workers	Social Work England 0808 196 2274	Yearly Renewal date varies by individual		Workforce Information run monthly reports from ESR, which lists all expiry dates and highlights those lapsed and due to lapse. Reports sent to HR Advisory Team to inform line manager to take appropriate action.
Other Bodies designated by the NHS Staff Council	NHS Employers 0113 306 3000 or 020 7799 6666			

Appendix Four: Lapse Panel Case Review

Employee Name		**Band**	
Service (CHS/FYPCLDA/DMH/ Enabling/Bank)		**Service/Area/ Ward/Department**	
Line Managers Name		**Individuals undertaking the case review (if different from the above)**	
Did the individual work whilst lapsed? (if so, please provide an eIRF number)		**Professional Regulatory Body (NMC, HCPC, GMC etc...)**	
Date of Lapsed registration		**Date of case review with employee**	
Date HR informed manager		**Date employee informed by the manager**	
Actions/Update taken by management in relation to lapsed registration. (Annual leave/unpaid leave/temporary move to non-registered role)			
Was application to re-register confirmed within 24 hours (of expiry)		**Yes Date of registration…….. No**	

Completed forms to be sent to the HR Representative for the area and Professional Standards team – lpt.professionalstandards@nhs.net

Introduction

All employees have a professional responsibility and contractual obligation to maintain their registration throughout their employment.

The purpose of this meeting is to establish the reasons of why you failed to maintain your registration with your professional regulatory body.

Questions and answers:

1. **Please explain what your job role and responsibilities are.**

2. **When did you qualify as a registered practitioner?**

3. **Do you have line management responsibility for staff?**

4. **Did you receive any notifications that your registration was due for renewal? If so, what action did you take?**

5. **When and how did you become aware that your professional registration had lapsed?**

6. **What action did you take/are taking as a result of the lapse?**

7. **Please explain why you were unable to renew your registration.**

8. **Part of your responsibility is to provide evidence of your registration confirmation to your line manager - have you done this in previous years? What was different this year?**

9. **How do you pay your professional registration fees? (Direct debit/cheque etc.)**

10. **Are you aware of the Professional Registration Policy?**

11. **What did you think the implications are for your lapsed registration?**

12. **Are you aware that it is a criminal offence to practice as a registered health practitioner if you are not registered with the appropriate professional regulatory body? Yes / No**

13. **Can you give us an account of your activity on each day you were practising as registered professional during the period of your lapsed registration? (if applicable)**

14. **Can you provide details of all patient/client/service user contact in that period?**

15. **Were you alone during that contact?**

16. **Were you responsible for staff during that period?**

17. **Did you undertake any supervision of other staff during that period?**

18. **What are the implications for patients/clients/service users when you are practicing with a lapsed registration? What are the implications for the Trust?**

19. **Is there anything you would do differently in the future?**

20. **Is there anything else you would like to tell us about in this meeting that is relevant to your lapsed registration?**

21. **What measures/steps have you taken to prevent this reoccurring in the future?**

To be completed by the Lapse Panel

Panel members	Name	Signature
HR Representative		
Lead Professional i.e., Head of Nursing/Deputy Head of Nursing/Lead AHP/Medical		
Date of panel		
Mitigation considered (please state details)		
Disciplinary action recommended?	Yes	No
Rationale for decision (whether sanction applied or not)		

Appendix Five: Guidance for Temporary Redeployment during a lapsed registration

For an employee whose professional registration has lapsed, temporary redeployment to a non-registered post should only be considered in exceptional circumstances on a case-by-case basis following advice from the Lead Professional and HR advisor for the area.

Where temporary redeployment is being considered the following process will apply:

1. The manager will meet with the Lead Professional and the HR advisor for the area to discuss the case and confirm that temporary redeployment is suitable. This meeting will identify which roles are deemed suitable.
2. An informal discussion will take place between the manager and employee to confirm the options for temporary redeployment and any impact this may temporarily have on their terms and conditions of employment such as pay, location, hours, working pattern etc.
3. If the employee agrees to temporary redeployment, the manager will complete a H2 Change of Circumstance form to temporarily redeploy the employee to the non-registered role with immediate effect. The individual will be moved to the top of the banding for the temporary role (where this is a lower-banded role).
4. The temporary redeployment will be confirmed in writing within 5 working days, this letter will outline the role and highlight the requirement that the employee must not carry out any duties that require registration.
5. This temporary redeployment should be reviewed every 2 weeks by the manager and HR advisor for the area. This review should consider any progress made with re-registration.
6. Temporary redeployment to a non-registered role should not normally exceed 4 weeks. Where it does, a meeting should be reconvened with the employee, the Lead Professional and HR advisor for the area to agree next steps.
7. Once the employee's re-registration is confirmed, the manager should submit a H2 Change of Circumstance form to revert them back to their previous role effective from the date which management were provided proof of renewed registration.
8. If the employee decides that they no longer wish to be re-registered and return to their substantive role, they should raise with their manager at the earliest opportunity to discuss options. There is no guarantee that the individual will be able to remain in their redeployed role and may need to undergo a fair recruitment and selection process.

N.B. Employees should consider any potential impact that temporary redeployment may have on future entitlements to pay and pension contributions.

Appendix Six: Governance

Version control and summary of changes

Version number	Date	Description of key change
1.	April 2012	Harmonised document.
2.	May 2012	Added NHSLA standards. Updated Monitoring and compliance section following comments received from Policy group
3.	31/01/2013	Added Appendix 5 Policy Monitoring Table
4.	13/12/2013	Focus throughout the policy is upon making it employees and managers responsibilities to ensure registration is maintained, with appropriate systems in place to assist.
		Section 4 - Responsibilities of a Managers/ leaders /employees updated
		Section 6 - Provides clarifications about Notification of payment and that when payment is received does not mean that the professional registration is renewed/updated.
		6.4 – updated wording regarding process for LPT Bank/E-Rostering staff 6.4.2 – reviewed wording for Agency staff - up to date wording in relation to checking professional registrations for Agency staff and its link with the Government Procurement Service framework. Also included information regarding TALENT in CHS division.
		Section 7- provided full details of the process that will be undertaken for all lapsed registrations. Provides clarity in the options for AfC staff groups and other staff groups such as Medics, Dental etc.
		Section 9 and 10 new – provides information about staff on sick leave, career break etc. to ensure registration is maintained throughout and Clarification is provided for staff who intend to retire still have a responsibility to ensure their registration is to be maintained up until their leaving date.
		Appendix 1 and 4– flowchart updated to reflect section 6 and 7
		Appendix 2 - (new) letter to manager
		Appendix 5 – New – provides renewals guidance for all regulatory body
		Appendix 8 – NMC guidance
		Appendix 9 – Due Regard
		Training paragraph added and NHS Constitution checklist included.

Version number	Date	Description of key change
5.	02/11/2015	Policy updated to reflect NMC change in practice re timescales to re-register.
		Appendix 8 updated
		Section 6.4 updated
		Policy amended to reflect that staff whose registration lapses will be able to undertake unqualified duties at a band 2 only.
9.	01/02/2018	Full policy review in line with policy review and expiry dates. Lapsed registration for Agenda for Change staff amended to annual leave or unpaid leave until registration completed. Expectations in line with revalidation added. Recognition of working at relevant banding in line with skills and roles that can be performed whilst waiting for registration to become live after completing a professional programme. Appendix 4 – removed. Already covered in Section 8. Amalgamation with the NMC Revalidation policy and procedure.
10.	01/10/2019	Paragraph 5.5.2 – If staff member experiencing any financial difficulties with payments of their registration fees can be sign posted as appropriate to support to help member of staff resolve issue. Extra question added to Appendix 5 (no 8).
11.	26/10/2022	Full policy review in line with policy review and expiry dates.
12.	29/03/2023	Full policy review following advice from the Director of Nursing team. Added Section 8.7.1 allowing temporary redeployment to a non-registered role following a lapsed registration. Amended Section 8.4 to reduce the timeframe for employees to confirm re-registration to 24 hours.
13.	01/03/2025	Added a paragraph (3.7) regarding professional accountability. Adopted new policy template. Added 3.15, 3.16 and 3.17.
14.	31/07/2026	Policy transferred to new Trust policy template. Full policy review. Additions: - Clarification regarding registered staff members undertaking non-registered roles. - Additional clarification regarding multiple registrations (Section 3.15). - Added Conditions of Practice (Section 3.19) - Removal of Appendix 2 Master Control Spreadsheet - Renumbered appendices due to removal of master control spreadsheet.

Responsibilities

Responsibility	Title
Executive Lead	Group Chief People Officer
Policy Author	HR Business Partner
Advisors	Group Chief Nurse/Executive Director of Nursing, Allied Health Professionals (AHPs) and Quality Assistant Director for Nursing and Quality LPT
Policy Expert Group	

Governance

Governance Level	Name
Level 1 Assurance Oversight	Joint People and Culture Committee
Level 2 Delivery Group for policy approval and compliance monitoring	Workforce Development Group
Consultation	Trust Policy Experts
	Staffside
	Staff Networks
	Professional Standards Learning Group
	All LPT Employees Bands 7 and above

Compliance Measures

KPI (only need 1-2 KPI's per policy)	Where will this be reported and how often
How the organisation checks registration with the relevant professional regulatory body, in accordance with their recommendations, for all directly employed clinical staff and LPT bank workers, both on initial appointment and on an ongoing basis.	Workforce Development Group Professional Registration Annual Report
How the organisation makes sure that registration checks are being carried out by all external agencies used by the organisation in respect of all clinical staff.	Workforce Development Group Professional Registration Annual Report

KPI (only need 1-2 KPI's per policy)	Where will this be reported and how often
How the organisation follows up those directly employed clinical staff (except medical staff) and LPT Bank worker who do not satisfy the validation of registration process.	Workforce Development Group Professional Registration Annual Report

Training Requirements

Training is recognised as a critical control measure in minimising risks associated with healthcare delivery. Ensuring that staff possess the appropriate knowledge and skills significantly reduces the potential for errors, omissions, and unsafe practice.

Managers

- Assess the training needs of staff to ensure they are equipped to meet the expectations set out within this policy.
- Facilitate staff access to all relevant training required for safe and effective compliance with this policy.
- Ensure all staff complete mandatory and role-essential training in line with Trust policy.
- Where gaps in available training are identified, collaborate with the policy author or subject matter expert to develop and agree a training or development plan.

Staff

- Maintain compliance with all mandatory and role-essential training as required by Trust policy.
- Identify any personal learning needs necessary for the safe and effective implementation of this policy, and work with your manager to agree an appropriate training plan to meet these needs.

Relevant training currently available to equip staff to deliver the requirements of this policy

Training topic title	Source of training e.g. uLearn, CPD
Essential HR for Managers	uLearn

References

This policy was drafted with reference to the following:

- Leicestershire Partnership Trust Professional Registration Policy
- Leicestershire Partnership Trust NMC Revalidation Policy and Procedure
- Leicester City Community Health Services Professional Registration Policy
- Leicestershire County and Rutland Professional Registration Policy
- Leicestershire Partnership Trusts Principal Counter Fraud Specialist
- Leicestershire Partnership Trusts Recruitment and Selection Policy
- NHS Employers 2010: NHS Employment Check Standards
- NHSLA Risk Management Handbook 2011/2012
- Nursing and Midwifery Council

- Leeds Community Healthcare NHS Trust Professional Registration Policy.