



Validation and Ongoing Monitoring of Registration Policy

“The PCT incorporates and supports the human rights of an individual as set out in the European Convention on Human Rights and the Human Rights Act 1998”

To be read with:

- Pre-employment Checks Policy
- Performance and Conduct Policy

Document Reference Information

Version	3.0
Status	Reviewed
Author/Lead	Pia Krohn
Team	Human Resources
Ratified By	JNCC, Board
Date Ratified	
Date Issued	February 2004
Date of Next Formal Review	September 2010
Target Audience	All staff

Version Control Record

Version	Description of Change(s)	Reason for Change	Author	Date
1.0	First version of policy		Patricia Atkinson	December 2003
2.0	Changes to incorporate comments following consultation	Changes in legislation	Patricia Atkinson	February 2004
2.1	Change/addition template letters and responsibility		Veda Dubery	August 2007
2.2				August 2008
3.0	Updated to reflect split between NHS Brent and NHS Brent Community Services	Updated and reviewed to reflect provider/commissioner split & added Human Rights Statement. Removal of reference to Deputy Director of Nursing (BCS)	Pia Krohn	September 2009

Document Derivation	<ul style="list-style-type: none">• NHS Litigation Authority Level PCT Risk Management Standard (Level 1A)• Risk Management Controls Assurance Standard• Risk Management Controls Assurance Standard for Human Resources• Scope of professional practice guidelines from the General Medical Council (GMC), Nursing and Midwifery Council (NMC), the Royal Pharmaceutical Society of Great Britain (RPhSGB) or Health Professional Council (HPC)
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1.0 Introduction

- 1.1 All doctors, nurses, pharmacists and allied health professionals employed by NHS Brent where registration with professional body is required as part of employment, must be registered with the General Medical Council (GMC), Nursing and Midwifery Council (NMC), the Royal Pharmaceutical Society of Great Britain (RPhSGB) or Health Professional Council (HPC) for allied health professionals, and hold a valid registration.
- 1.2 These organisations are the statutory regulatory body for establishing and monitoring professional standards. They confer or remove the right of doctors, nurses, pharmacists and allied health professionals to practice.
- 1.3 For doctors, pharmacists and allied health professional, registration is renewed every year. For nurses, registration is renewed every three years.
- 1.4 Every doctor, nurse, pharmacist or allied health professional is issued with a registration number (a PIN number) from the GMC, NMC, RPhSGB or HPC before he/she can practice within the UK. The practitioner should be able to produce a card/certificate giving details of his/her registration, PIN number and expiry date of registration.
- 1.5 The individual professional's PIN card/certificate is not proof of registration. The only proof of registration is for employers to use the GMC, NMC, RPhSGB and HPC registration confirmation service.
- 1.6 It is the individual practitioner's responsibility to:
 - read and understand this document
 - work within the protocol identified
 - ensure that the PCT has their registration information and that any renewals are recorded.

2.0 Purpose

- 2.1 The PCT recognises its duty of care towards patients, the public and its employees and is committed to ensure their safety. As part of this, the PCT will ensure that all its employees and contractors are duly registered with their professional bodies.

3.0 Scope

- 3.1 This policy relates to all **clinical** staff working for the PCT directly employed, employed through an agency, self employed or via the Brent Bank.

4.0 Duties and Responsibilities

4.1 Human Resources

4.1.1 Verification of Registration on Recruitment

- Human Resources will take on the responsibility for managing the database and verifying registration of all doctors, nurses, pharmacists and allied health professionals who work for the PCT.
- When a registered doctor, nurse, pharmacist or allied health professional is offered a post, the Human Resources Team will:-
 - Contact the professional registering organisation and confirm valid registration
 - Record on the application form the date and who checked the registration and part or parts of the register and expiry date of the new applicant.
 - Photocopy the card/certificate and statement of entry and place a copy on their personal file.
- Brent Bank is responsible for obtaining proof of registration from the Temporary Agencies, on every occasion when that they supply the PCT with a doctor, nurse, pharmacist or allied health professional.

4.1.2 Re-verification of Registration

- The Human Resources Team will produce a monthly report, which will be supplied to the line managers. This report will identify the names of doctors, nurses, pharmacists and allied health professionals whose PIN expires at some stage over the forthcoming 2 months (approx.).
- Once the line manager has taken a copy of the PIN card/certificate (original must be seen), signed it and forwarded it to Human Resources, the Human Resources team will up-date the PIN registration details onto the appropriate system and file the copy in the doctor, nurse, pharmacist or allied health professional personnel file.

4.2 Agencies

4.2.1 Verification of Registration on Recruitment

- Have the responsibility of ensuring that all doctors, nurses, pharmacists and allied health professional supplied by them are registered.
- All agencies supplied to the PCT will also comply with the National minimum standards as laid out in the Care Standards Act 2000 and London Agency Project criteria.

4.3 Line Managers

4.3.1 Verification of Registration on Recruitment

- Line managers will ask agencies to complete an agency verification form thereby ensuring the appropriate checks have been actioned by the agency.
- Where the agency is not part of the London Agency Project, it is the line manager's responsibility to verify registration details.

4.3.2 Re-verification of Registration

- Managers are responsible for obtaining proof of registration from staff listed on the monthly report supplied by Human Resources, which shows doctors, nurses, pharmacists and allied health professionals whose PIN expires at some stage over the forthcoming 2 months (approx.).
- The manager will copy the PIN card/certificate (original must be seen) and photocopy. On the photocopy, the manager must sign, date and print their name for audit purposes.
- It is the manager's responsibility to ensure safe delivery of this copy to the Human Resources team.
- If an individual has failed to renew their professional registration, the line Manager must notify the doctor, nurse, pharmacist or allied health professional that they will not be able to work until confirmation from the professional organisation that the PIN is valid and proof received by Human Resources..

4.4 Individual Doctors, Nurses, Pharmacists and Allied Health Professionals

4.4.1 Re-verification of Registration

- Following receipt of notification from the line manager (Appendix 1), the individual doctor, nurse, pharmacist and allied

health professional will present the actual PIN card/certificate to their manager.

5.0 Failure to produce evidence of re-registration

- 5.1 Failure to produce evidence of re-registration is a breach of contract and disciplinary action will be considered.
- 5.2 Individual circumstances that have led to the failure to re-register will be taken into consideration. If the failure is due to the re-registering process within the professional organisation, then supporting evidence from the professional body will be required. If the registration has lapsed within the preceding three months, the member of staff should be offered alternative employment at a non-clinical grade until proof of re-registration is given. This should be no longer than four weeks. If the registration has lapsed for more than three months, the member of staff should be suspended without pay until registration is renewed and verified with the professional registration confirmation service.
- 5.3 The line Manager must notify the doctor, nurse, pharmacist or allied health professional that they will not be able to work until confirmation from the professional organisation that the PIN is valid and proof received by Human Resources. During this period of time, the individual will be deemed to be on unpaid leave.
- 5.4 Any member of staff who is placed on unpaid leave will be seen by the Human Resources team and their line Manager on their return to work to highlight the seriousness of this situation as doctors, nurses and allied health professional with expired registrations are putting themselves and the PCT at risk.

6.0 Removals from the register

- 6.1 The central point for receipt of the NMC 'Removal from register' list will be the Deputy Director of Nursing's (Brent Community Services) office.
- 6.2 The Deputy Director of Nursing (BCS) will circulate the information to the Human Resources Team and line managers in a timely manner.
- 6.3 The Human Resources Team and line managers will check the list against all staff names to ensure there is no match against any removal or suspension on the list. The Human Resources team will check details of all the nurses/midwives who have been offered posts.
- 6.4 Any matches will be notified to the Director of Nursing, Human Resources, and appropriate manager. The advice of the Deputy Director of Nursing (BCS) will be sought, as to what action should be taken.
- 6.5 In the event of any difficulties with a registration the Deputy Director of

Nursing (BCS) will be consulted for professional advice.

6.6 The case will be individually reviewed and treated appropriately on its merits.

7.0 Dissemination and Implementation

7.1 The author of this policy is responsible for contacting the communications team who will upload the master copy onto the PCT intranet website, publicise it on the team brief, communication bulletin and intranet front page.

7.2 Managers are responsible for making paper copies available to all areas that do not have access to the PCT website.

8.0 Monitoring of compliance and effectiveness

8.1 This policy will be reviewed annually to ensure that it remains in line with current employment law and NHS guidance. In addition to this, its effectiveness will be monitored against the audit tool in appendix 11.

Appendix 1: Notification letter from Line Manager

Dear [name of staff member]

RE: VERIFICATION OF REGISTRATION

Your professional registration will expire within the next two months. As part of the Validation and Ongoing Monitoring of Registration Policy, you are required to produce the updated PIN/certificate to your manager, a copy of which will be forwarded to Human Resources to be kept on your personal file.

Failure to produce this evidence may lead to further action, in accordance with the Policy.

Yours sincerely

[Name of Manager]

Appendix 2 - Equality Impact Assessment Tool

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	n/a	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	n/a	
6.	What alternatives are there to achieving the policy/guidance without the impact?	n/a	
7.	Can we reduce the impact by taking different action?	n/a	

If you have identified a potential discriminatory impact of this procedural document, please refer it to the Equality & Diversity Manager together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact the Equality & Diversity Manager.

Appendix 3 – Document Review Checklist

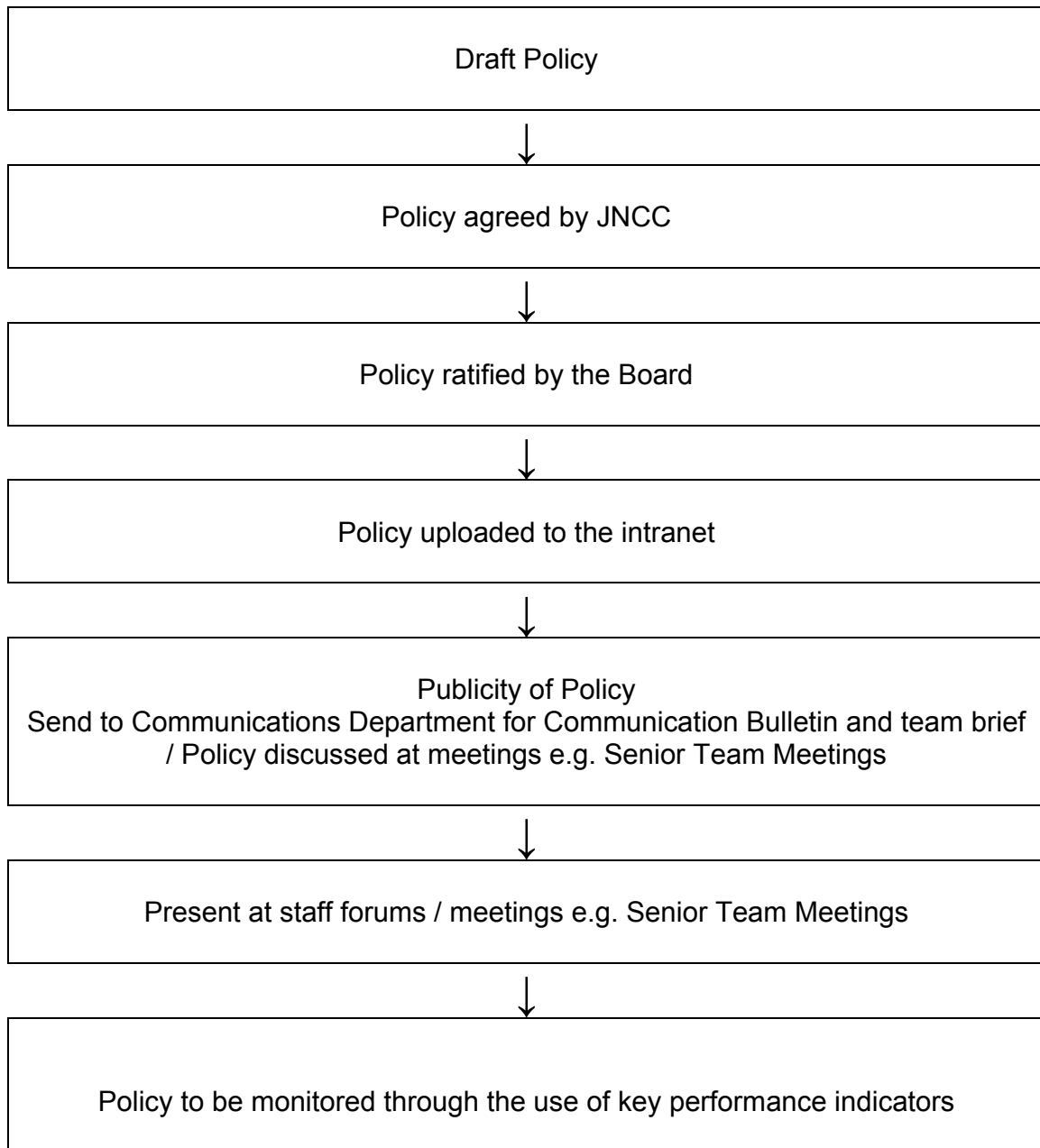
	Title of document being reviewed: Validation and Ongoing Monitoring of Registration Policy	Yes/No/ Unsure	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Is the method described in brief?	Yes	
	Are people involved in the development identified?	Yes	
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
	Are style, font type and size etc correct?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are the references cited in full?	Yes	
	Are supporting documents referenced?	Yes	

	Title of document being reviewed: Validation and Ongoing Monitoring of Registration Policy	Yes/No/ Unsure	Comments
6.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes	
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how this will be done?	Yes	
	Does the plan include the necessary training/support to ensure compliance?	Yes	
8.	Document Control		
	Does the document identify where it will be held?	Yes	
	Have archiving arrangements for superseded documents been addressed?	Yes	
9.	Process to Monitor Compliance and Effectiveness		
	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes	
	Is there a plan to review or audit compliance with the document?	Yes	
10	Review Date		
	Is the review date identified?	Yes	
	Is the frequency of review identified? If so is it acceptable?	Yes	
11	Overall Responsibility for the Document		
	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the	Yes	

	Title of document being reviewed: Validation and Ongoing Monitoring of Registration Policy	Yes/No/ Unsure	Comments
	document?		

Acknowledgement: Cambridgeshire and Peterborough Mental Health Partnership NHS Trust

APPENDIX 4 - Document Publication Flowchart



APPENDIX 5 – Audit tool

The following are five questions to assess your understanding and implementation of this policy.

Score yourself – Yes / No

Do you understand who this Validation and Ongoing Monitoring of Registration policy applies to? Yes / No

Do you know what your professional body is and how to renew? your registration? Yes / No

Do you understand your responsibilities as members of staff? Yes / No

Do you understand your responsibilities as a manager? Yes / No

Do you understand what the possible consequences of failure? to provide evidence of registration are? Yes / No

If you score yourself No for any of the questions, please re-read the relevant section of the policy. If you are still unclear, please contact the Human Resources department for clarification.

A copy of this should be kept in your personal file and may be used as part of a continuous professional development folder.

Signed **Role**

Date