Development of a regulatory framework for public health practitioners (currently unregistered) aims to protect the public via the development of agreed professional standards which will:

- provide quality assurance of the workforce to a common and agreed standard
- provide quality control of the workforce by placement onto a professional register.

There are seven UK pilot schemes to support practitioners to build portfolios for assessment against the standards and thereby gain registration with UKPHR as the voluntary UK regulator. We have evaluated four.

Wales was one of the first to create and test-drive a support, assessment and verification process. 60 practitioners have signed up of which 9 have so far achieved registration. Given the UK-wide success of the pilot phase, the schemes will now be recruiting more applicants and assessors.

As evaluators we spoke to the Chief Executive of Public Health Wales, a local authority manager, three Public Health Directors, a consultant and a Specialist from across Wales – all of whom were familiar with the process and with practitioners in their teams who had been working towards registration.

Leadership perspectives on practitioner registration in Public Health Wales; extracts from interviews

We are interested in why leaders of the public health system in Wales see a need for registration with a voluntary regulator. The answer from them is the need for independent assurance that practitioners are safe to practice

“The costs of us getting things wrong is very significant. In the wake of the Francis report the climate has changed around the need for people people to demonstrate that they work to appropriate standards.”

Chief Exec Public Health Wales

“Public Health people have a huge impact on populations – on a high number of people…look at health protection. If you do not practice professionally to protect others they would be harmed by your inaction. You could have population-level health intelligence that was completely wrong. That crucial issue of safety is really important to local government where I’m not sure it yet pays enough regard to evidence-based practice.”

Director of Public Health
We asked: when you see that someone has completed the UKPHR registration process, what do you think this tells you about the practitioner?

“Completing the UKPHR registration process tells me a number of things about a Public Health practitioner: it tells me about their commitment, stamina and resilience. This is not an easy thing for people to do; you have to work at it and it gives us a clear indication of their commitment and willingness to support their own personal and professional development as well as giving us confidence in their competence.”

“I think it means they have taken their own practice and standards very seriously and are seeking to register as a competent Public Health practitioner and doing it openly through peer review. Its a commitment to practice. To continuing professional development and to regular appraisal as part of the relevant professional body. It indicates their commitment to Public Health and and their wish to develop a career in Public Health.”

“It helps her confidence, building her portfolio of work. It contains a range of diverse stuff across all the competences of my organization. Doing this you are forced to stop and reflect. It helped her frame what she’d done in the core competences of Public Health and helped her reframe her specific contribution.”

“It tells me they can lead and finish. It is a bit of an endurance test which separates people out. If they can do this they can put in the hours in and deliver on things; that’s what it tells me. It's a really good marker that they can definitely do it, they will have confidence and a seal of approval.”

“Chief Exec Public Health Wales”

“Director of Public Health”

“Consultant in Public Health”

“Health Promotion Specialist”
We asked: what do you see as the advantages of this to an organization employing public health practitioners?

“We can be sure that what a practitioner is promoting is evidence-based practice. We can now be absolutely confident that’s what it will be. Historically we used to have good ideas and try them out.”

Health Promotion Specialist

“The advantage for an employer from having practitioners registered with the UKPHR and committed to CPD is the evidence it provides that the practitioners they employ want to do the right things in the right way and are working at the right level. Its basic governance in the same way that medics and nurses and other groups have through their bodies.”

Chief Exec Public Health Wales

“It provides employers with assurance that the person they are taking on not only has the right competence and attitudes but also professional structures to ensure they continue to practice in a competent and safe way. This is a very positive thing for an employer. It is the equivalent to what an employer expects of an Allied Health Professional. And it can mean dual registration as in environmental health or pharmacy. I have maintained my dual registration.”

Director of Public Health

“The risk is that they bumble along in their day-to-day work, absorbing knowledge but without pro-active work to put them on top of their game. This portfolio completion has been very helpful as we’re trying to get public health much more embedded right across the Health Board. I would absolutely like Registration because it would give an assurance that people who are embedded and spending most of their time with people who are not public health experts have a set of basic competences and are on top of their game. And the commitment to CPD means we know they will keep abreast of what’s happening and about how we use and apply data. I would love to get to the stage where the local authority planning department is appointing someone with a public health skill-set and registration – just as they might appoint a manager with a recognised skill-set and qualification. That way we can build the public health practitioner community of practice, sharing core competencies, permissions and legitimacy. It shouldn’t create an entitlement to career progression but better access to another set of opportunities.”

Director of Public Health
We asked: are you more likely to employ someone who has completed the registration process?

“Over time I would be expecting us to be increasingly wanting people who are Registered with the UKPHR. I don't want to close possibilities down for people so I don't see getting a job as conditional on Registration but I see us on a journey towards a critical mass – why would I bother otherwise?”

Chief Exec Public Health Wales

“We might not make it essential, more likely desirable, but make it essential practitioners start building their portfolio. …practitioners in isolated roles need to have the backing in their professionalism to know they’ve got it right. Its more important than if you're working in a public health organisation to feel sure of your competence.”

Local Authority Manager

“Registration would tell me they are definitely committed to public health. A Masters does not tell me this; it tells me about what someone knows. This tells you about applying the knowledge in practice, it indicates breadth of competence and quality assures practitioners. Making it essential to have Registration would not be appropriate in a job specification but to insist someone was working towards Registration would be.”

Consultant in Public Health

“If I had the choice then I would absolutely be more likely to employ someone who has completed the registration process, and the more we get them the more I would expect that to be the norm. And if I did appoint someone without it I would support them to register once they were appointed.”

Director of Public Health

“Another advantage is that it forces an employer to take a more systematic approach to their development, meeting their requirements for CPD. We have to tool up to equip people with the skills and its helps focus us on developing and engaging our employees which impacts very positively on our bottom line. There are direct and indirect costs to this process but practitioners, assessors and verifiers put a lot of their own time into this; the amount born by the organization is not huge and of very little significance beside the costs of not putting this quality assurance process in place. There was a view that if you wanted to get on you had to get a Masters; we were funding people to get their MPH and now we are saying that is not always necessary, and this option is more cost-effective.”

Chief Exec Public Health Wales