



Public health practitioner registration - Policy briefing

August 2015

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Public health practitioner registration – Policy briefing: ENGLAND

To: Association of Directors of Public Health (ADPH)
Chartered Institute of Environmental Health
Department of Health (DH)
Faculty of Public Health (FPH)
Health Education England (HEE)
Local Government Association
Public Health England (PHE)
Royal Society for Public Health (RSPH)

Date: 26 August 2015

Purpose: To brief public health partner organisations on benefits of public health practitioner registration in a public policy context and seek support to take practitioner registration forward

Executive summary

Public health practitioner registration is a cost effective way of ensuring that front line public health practitioners meet and maintain quality assured standards of competence. It meets the professional development needs of those intent on public health careers, enables employers to recruit with confidence and protects the public from risk of malpractice.

UKPHR believes public policy should be supportive of practitioner registration. Key partners should collaborate to support it. A number of public health organisations can, and ought to, assist in extending practitioner registration to parts of England currently outside the system.

In its operation, UKPHR's public health practitioner registration is devolved to local schemes to recruit and support practitioners developmentally. Practitioners prepare portfolios for assessment and the standards for portfolio content and their assessment are set nationally. Experienced public health professionals assess practitioner portfolios against these standards and UKPHR's moderators ensure consistency and quality assurance.

The standards were set collaboratively by public health partners, and UKPHR guards them on all partners' behalf. UKPHR reinforces consistency through regulating entry onto the register, training local schemes' assessors and verifiers and providing support and guidance.

As independent evaluation confirms, local schemes have been able to recruit and train sufficient volunteer assessors, verifiers and mentors to run, support and develop programmes to facilitate completion of portfolios by practitioners. Nearly 500 practitioners are either registered with UKPHR or currently developing their portfolios.

With a total public health practitioner workforce of more than 35,000, a significant proportion unregulated, we suggest that there is a need for faster expansion of practitioner registration. Your help and support are needed to enable UKPHR to safeguard the public, employers and the public health workforce by achieving UK-wide registration for practitioners.

1. Practitioner registration – how can you help?

We seek system-wide recognition of the value of registration. A united front in the public health system in support of practitioner registration would be beneficial for the public, for the public health workforce and for their employers.

When we survey registrants, the top concern expressed is for employers to take registration into account in recruitment decisions. We would like to see a growing track record of public health employers, including local authorities, referring to registration in job adverts and job descriptions as “desirable” and “essential”.

We operate registration UK-wide, but currently there are gaps in provision of development support and portfolio assessment because some parts of England have no local scheme. Comprehensive local scheme coverage would benefit practitioner registration as a whole.

2. Practitioners – who are they and how many are there?

Commissioned by the Department of Health, Health Education England and Public Health England, the *Centre for Workforce Intelligence* (CfWI, 2014) mapped the core public health workforce in England.¹ They have estimated that the public health practitioner workforce comprises between 35,150 – 39,550 practitioners in a wide range of disciplines.

Some disciplines are subject to regulation (nurses and health visitors, for example) others are not. UKPHR has begun to register practitioners but there is much work still to do. To date 169 practitioners have achieved UKPHR registration. In addition a further 300-plus practitioners are currently in the process of preparing their portfolios for assessment, supported in this work by local schemes.

3. Practitioner registration – what are the benefits?

Practitioner registration offers:

- > **Policy-makers** a strategic commitment to public health workforce development
- > **practitioners** the means of establishing competence in public health practice at a recognised standard
- > **employers** a benchmark of quality assured standards for practitioners they recruit
- > **commissioners and providers** of public health services a means of specifying a measure of competence, thereby contributing to quality of service and due diligence
- > **members of the public** the ability to check that practitioners are registered.

Registration raises the profile of public health practice, is a bridge between wider workforce and the practitioner workforce, provides a springboard for practitioners wishing to advance further in public health and contributes to making careers in the discipline more attractive.

Individual practitioners benefit in terms of personal and professional development as well as the sense of achievement registration brings. There is also a view that registration makes them more employable. Registration provides evidence to colleagues, employers and the public of an assured level of competence achieved.

¹ <http://www.cfwi.org.uk/publications/mapping-the-core-public-health-workforce>

4. Public health practitioners – why does registration matter?

There are recognised entry qualifications into some disciplines in the core public health practitioner workforce (environmental health and nursing, for example). Public health lacks recognised entry qualifications for a career in public health practice except at the level of public health specialist. This causes problems for individuals thinking of embarking on a career in public health, for employers seeking to recruit to public health posts and for higher education institutions and other training providers wishing to provide courses and qualifications which provide entry into public health careers.

Practitioner registration addresses this gap because it ensures that competence is assessed and assured according to a consistent set of national standards and a nationally consistent assessment process. Increasing numbers of employers are requiring their public health practitioners either to be registered or working towards registration.

5. UKPHR - how has it responded?

Practitioner registration is founded on a robust set of standards applied comprehensively and consistently. These standards were developed in collaboration with public health partners using the *Public Health Skills & Knowledge Framework* (PHSKF) as the source document and also drawn from both the *NHS Knowledge & Skills Framework* and the *National Occupational Standards for Public Health*. The standards are pitched at the level of practitioners capable of working autonomously: that is, at Level 5 and above in the PHSKF.²

Registrants are required to maintain a standard of CPD set by UKPHR as a condition of ongoing registration.³ We also plan to introduce revalidation. These requirements benefit practitioners because they provide assurance that competence once proved for registration is maintained and updated subsequent to achieving registration.

Currently there are eight English schemes⁴ (in addition to a scheme covering Wales which is also open to practitioners in Northern Ireland and one scheme covering West of Scotland). UKPHR and scheme coordinators have published a guide to setting up a new scheme.⁵

Evaluation⁶ of the early adopters confirmed:

- Process ensured every registrant fully demonstrated the standards are met
- Each scheme was able to recruit and train adequate numbers of assessors, verifiers and mentors and can run support activities that facilitate completion of portfolios
- UKPHR demonstrated its capacity to provide central support and guidance systems.

² http://www.phorcast.org.uk/page.php?page_id=44

³ See UKPHR's CPD policy and scheme <http://www.ukphr.org/registration/cpd-practitioners/>

⁴ See the map showing coverage on UKPHR's website <http://www.ukphr.org/i-want-to-apply-for-registration/practitioner/>

⁵ <http://www.ukphr.org/wp-content/uploads/2014/10/Setting-up-a-Scheme.pdf>

⁶ <http://www.ukphr.org/wp-content/uploads/2015/04/UKPHR-evaluation-headline.pdf>

6. Practitioner registration – how is it funded?

The current annual practitioner registration fee charged by UKPHR is £95.

Funding for local schemes has to date come from an impressive range of contributors, including HEE, local authorities (corporately and Directors of Public Health), PHE and Universities. This makes for broad and diverse support from a committed range of partners at the local level. They provide help in kind – for example, office accommodation for a coordinator and employees willing to be volunteer assessors and verifiers.

7. Practitioner registration – who are the assessors and verifiers?

Senior public health professionals comprise the assessor and verifier capacity. They tell us that they gain from participating in a number of ways:

- They keep up to date with developments in public health practice and maintain their continuing professional development (CPD) as professionally obliged to do
- Volunteers speak of a sense of “putting something back” into public health practice which has given them satisfying careers.⁷

Scheme coordinators report that they are able to recruit the numbers of assessors, verifiers and mentors that they need for the size of their schemes. The senior professionals who fulfill these roles undertake training of a national standard provided by UKPHR and accept an obligation to attend regular development sessions thereafter. Employers are supportive in allowing time for these duties.

8. Practitioner registration – what are the next steps?

Work is required to embed a comprehensive practitioner registration model in the public health system. Wider workforce, new career entrants and current practitioners should see opportunities to build up skills, knowledge and competence. Examples include:

- Public Health Wales is piloting recognition of advanced practice (public health)
- In Wessex and the West Midlands a new ST3 Tutorial Programme will fund registered practitioners to attain ST3 level of the Specialty Training Programme.

In summary, the public policy objective should be for UKPHR to work with the public health system in England to extend the currently highly successful local schemes to cover the whole of England, providing enhanced protection for the public, professionals and their employers, and remove the current inequity of access limited by geography.

Please address all responses to this policy briefing to:
David Kidney, Executive Director, UKPHR, 18c McLaren Building, 46, Priory Queensway,
BIRMINGHAM B4 7LR. Tel. 0121 296 4370 d.kidney@ukphr.org

⁷ See evaluation reports, UKPHR website *ibid*

Public health practitioner registration – Policy briefing: NORTHERN IRELAND

To: Association of Directors of Public Health (ADPH);
Chartered Institute of Environmental Health in Northern Ireland;
Department of Health Social Services & Public Safety (DHSSPS);
Faculty of Public Health (FPH); Institute of Public Health in Ireland;
Public Health Agency; Northern Ireland Local Government Association;
Royal Society for Public Health (RSPH)

Date: 26 August 2015

Purpose: To brief public health partner organisations on benefits of public health practitioner registration in a public policy context and seek support to take practitioner registration forward

Executive summary

Public health practitioner registration is a cost effective way of ensuring that front line public health practitioners meet and maintain quality assured standards of competence. It meets the professional development needs of those intent on public health careers, enables employers to recruit with confidence and protects the public from risk of malpractice.

UKPHR believes public policy should be supportive of practitioner registration. Key partners should collaborate to support it. A number of public health organisations can, and ought to, assist in extending practitioner registration to Northern Ireland, currently served by a “piggy back” arrangement with Wales.

In its operation, UKPHR’s public health practitioner registration is devolved to local schemes to recruit and support practitioners developmentally. Practitioners prepare portfolios for assessment and the standards for portfolio content and their assessment are set nationally. Experienced public health professionals assess practitioner portfolios against these standards and UKPHR’s moderators ensure consistency and quality assurance.

The standards were set collaboratively by public health partners, and UKPHR guards them on all partners’ behalf. UKPHR reinforces consistency through regulating entry onto the register, training local schemes’ assessors and verifiers and providing support and guidance.

As independent evaluation confirms, local schemes have been able to recruit and train sufficient volunteer assessors, verifiers and mentors to run, support and develop programmes to facilitate completion of portfolios by practitioners. Nearly 500 practitioners are either registered with UKPHR or currently developing their portfolios.

With a proportion of the Northern Ireland public health workforce unregulated, we suggest that there is a need for expansion of the arrangements we manage for practitioner registration to include Northern Ireland. Your help and support are needed to enable UKPHR to safeguard the public, employers and the public health workforce by contribution to the achievement of UK-wide registration for practitioners.

1. Practitioner registration – how can you help?

We seek system-wide recognition of the value of registration. A united front in the public health system in support of practitioner registration would be beneficial for the public, for the public health workforce and for their employers.

When we survey registrants, the top concern expressed is for employers to take registration into account in recruitment decisions. We would like to see a growing track record of public health employers, including local authorities, referring to registration in job adverts and job descriptions as “desirable” and “essential”, or ‘working toward registration’.

We operate registration UK-wide, but there are gaps in provision of development support and portfolio assessment. In addition to the absence of a practitioner registration scheme in Northern Ireland, there are also some parts of England and Scotland with no local scheme. Comprehensive local scheme coverage would benefit practitioner registration as a whole.

2. Practitioners – who are they and how many are there?

The *Centre for Workforce Intelligence* (CfWI, 2014) estimated England’s public health practitioner workforce between 35,150 – 39,550¹ and Scotland’s between 6,000 – 6,350² practitioners in a wide range of disciplines. UKPHR is not aware of research-based data about the size of Northern Ireland’s practitioner workforce.

Practitioners work across the three traditionally recognised pillars of public health practice: healthcare services, health improvement and health protection; they also work in what is perhaps the fourth pillar, namely intelligence and evidence. Importantly, practitioners come into public health from a range of backgrounds, which gives richness and brings in diverse views. Their competencies complement this diversity, ensuring consistent practice.

Some disciplines are subject to regulation (nurses and health visitors, for example) others are not. UKPHR has begun to register practitioners but there is much work still to do. To date 169 practitioners have achieved UKPHR registration. In addition a further 300-plus practitioners are currently in the process of preparing their portfolios for assessment, supported in this work by local schemes.

3. Practitioner registration – what are the benefits?

Practitioner registration offers:

- > **Policy-makers** a strategic commitment to public health workforce development
- > **practitioners** the means of establishing competence in public health practice at a recognised standard
- > **employers** a benchmark of quality assured standards for practitioners they recruit
- > **commissioners and providers** of public health services a means of specifying a measure of competence, thereby contributing to quality of service and due diligence
- > **members of the public** the ability to check that practitioners are registered.

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² <http://www.healthscotland.com/uploads/documents/25602-CfWI%20PH%20Workforce%20Mapping%20in%20Scotland%20-%20Final%20Research%20and%20Evaluation%20Report.pdf>

Registration raises the profile of public health practice, is a bridge between wider workforce and the practitioner workforce, provides a springboard for practitioners wishing to advance further in public health and contributes to making careers in the discipline more attractive.

Individual practitioners benefit in personal and professional development. Achieving registration attracts a sense of achievement and a view that one is more employable. It is evidence to colleagues, employers and the public of an assured level of competence.

4. Public health practitioners – why does registration matter?

There are recognised entry qualifications into some disciplines in the core public health practitioner workforce (environmental health and nursing, for example). Public health lacks recognised entry qualifications for a career in public health practice except at the level of public health specialist. This is a problem for individuals seeking a career in public health, for employers recruiting to public health posts and for higher education institutions and training providers wishing to provide courses and qualifications for entry into public health careers.

Practitioner registration addresses this gap because it ensures that competence is assessed and assured according to a consistent set of national standards and a nationally consistent assessment process. Increasing numbers of employers are requiring their public health practitioners either to be registered or working towards registration.

5. UKPHR - how has it responded?

Practitioner registration is founded on a robust set of standards applied comprehensively and consistently. These standards were developed in collaboration with public health partners using the *Public Health Skills & Knowledge Framework* (PHSKF) as the source document and also drawn from both the *NHS Knowledge & Skills Framework* and the *National Occupational Standards for Public Health*. The standards are pitched at the level of practitioners capable of working autonomously: that is, at Level 5 and above in the PHSKF.³

Registrants are required to maintain a standard of CPD set by UKPHR as a condition of ongoing registration.⁴ We also plan to introduce revalidation. These requirements benefit practitioners because they provide assurance that competence once proved for registration is maintained and updated subsequent to achieving registration.

Currently there are ten local schemes of practitioner registration, including a scheme covering Wales which is also open to practitioners in Northern Ireland. UKPHR and scheme coordinators have published a guide to setting up a new scheme.⁵

Evaluation⁶ of the early adopters confirmed:

- Process ensured every registrant fully demonstrated the standards are met
- Each scheme was able to recruit and train adequate numbers of assessors, verifiers and mentors and can run support activities that facilitate completion of portfolios
- UKPHR demonstrated its capacity to provide central support and guidance systems.

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⁴ See UKPHR's CPD policy and scheme <http://www.ukphr.org/registration/cpd-practitioners/>

⁵ <http://www.ukphr.org/wp-content/uploads/2014/10/Setting-up-a-Scheme.pdf>

⁶ <http://www.ukphr.org/wp-content/uploads/2015/04/UKPHR-evaluation-headline.pdf>

6. Practitioner registration – how is it funded?

The current annual practitioner registration fee charged by UKPHR is £95. Local schemes pay UKPHR for training of assessors and verifiers and for moderation.

Funding for local schemes has to date come from an impressive range of contributors, including the NHS, local authorities (corporately and Directors of Public Health) and Universities. This makes for broad and diverse support from a committed range of partners at the local level.

7. Practitioner registration – who are the assessors and verifiers?

Senior public health professionals comprise the assessor and verifier capacity. They tell us that they gain from participating in a number of ways:

- They keep up to date with developments in public health practice and maintain their continuing professional development (CPD) as professionally obliged to do
- Volunteers speak of a sense of “putting something back” into public health practice which has given them satisfying careers.⁷

Scheme coordinators report that they are able to recruit the numbers of assessors, verifiers and mentors that they need for the size of their schemes. The senior professionals who fulfil these roles undertake training of a national standard provided by UKPHR and accept an obligation to attend regular development sessions thereafter. Employers are supportive in allowing time for these duties.

8. Practitioner registration – what are the next steps?

Work is required to embed a comprehensive practitioner registration model in the public health system. Wider workforce, new career entrants and current practitioners should see opportunities to build up skills, knowledge and competence. Examples include:

- Public Health Wales is piloting recognition of advanced practice (public health)
- In Wessex and the West Midlands a new ST3 Tutorial Programme will fund registered practitioners to attain ST3 level of the Specialty Training Programme.

In summary, the public policy objective should be for UKPHR to work with the public health system in Northern Ireland to extend the currently highly successful local schemes to cover the whole of the UK, providing enhanced protection for the public, professionals and their employers, and remove the current inequity of access limited by geography.

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BIRMINGHAM B4 7LR. Tel. 0121 296 4370 d.kidney@ukphr.org

⁷ See evaluation reports, UKPHR website *ibid*

Public health practitioner registration – Policy briefing: SCOTLAND

To:

Association of Directors of Public Health (ADPH) Chartered Institute of Environmental Health Chief Executives of NHS Boards Convention of Scottish Local Authorities (COSLA) Department of Health Faculty of Public Health (FPH) Healthcare Improvement Scotland Higher Education Institutions	NHS Education Scotland NHS Health Scotland Public Health Review Team Royal Environmental Health Institute of Scotland Royal Society for Public Health (RSPH) Minister, CMO, Health & Social Care Directorate Scottish Health Promotion Managers Group Scottish Public Health Network (ScotPHN)
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Date: 26 August 2015

Purpose: To brief public health partner organisations on benefits of public health practitioner registration in a public policy context and seek support to take practitioner registration forward

Executive summary

Public health practitioner registration is a cost effective way of ensuring that front line public health practitioners meet and maintain quality assured standards of competence. It provides opportunity for a consistent vision for and consistent practice in public health. It meets the professional development needs of those intent on public health careers, enables employers to recruit with confidence and protects the public from risk of malpractice.

UKPHR believes public policy should be supportive of practitioner registration. Key partners should collaborate to support it. A number of public health organisations can, and ought to, assist in achieving Scotland-wide practitioner registration.

In its operation, UKPHR's public health practitioner registration is devolved to local schemes to recruit and support practitioners developmentally. Practitioners prepare portfolios for assessment and the standards for portfolio content and their assessment are set nationally. Experienced public health professionals assess practitioner portfolios against these standards and UKPHR's moderators ensure consistency and quality assurance.

The standards were set collaboratively by public health partners, and UKPHR guards them on all partners' behalf. UKPHR reinforces consistency through regulating entry onto the register, training local schemes' assessors and verifiers and providing support and guidance.

As independent evaluation confirms, local schemes have been able to recruit and train sufficient volunteer assessors, verifiers and mentors to run, support and develop programmes to facilitate completion of portfolios by practitioners. Nearly 500 practitioners are either registered with UKPHR or currently developing their portfolios.

With a proportion of Scotland's public health workforce unregulated, we suggest that there is a need for expansion of the arrangements we manage for practitioner registration to include all Scotland. Your help and support are needed to enable UKPHR to safeguard the public, employers and the public health workforce by achieving UK-wide practitioner registration.

1. Practitioner registration – how can you help?

We seek system-wide recognition of the value of registration. A united front in the public health system in support of practitioner registration would be beneficial for the public, for the public health workforce and for their employers.

When we survey registrants, the top concern expressed is for employers to take registration into account in recruitment decisions. We would like to see a growing track record of public health employers, including local authorities, referring to registration in job adverts and job descriptions as “desirable” and “essential”.

We operate registration UK-wide, but there are gaps in provision of development support and portfolio assessment. Practitioner registration is not available in Scotland outside the West of Scotland scheme and some parts of England have no local scheme. Comprehensive local scheme coverage would benefit practitioner registration as a whole.

2. Practitioners – who are they and how many are there?

The *Centre for Workforce Intelligence* (CfWI, 2014) estimated England’s public health practitioner workforce between 35,150 – 39,550¹ and Scotland’s between 6,000 – 6,350² practitioners in a wide range of disciplines.

Practitioners work across the three traditionally recognised pillars of public health practice: healthcare services, health improvement and health protection; they also work in what is perhaps the fourth pillar, namely intelligence and evidence. It is important to note that practitioners come into public health from a range of backgrounds, which gives richness and brings in diverse views. Their competencies complement this, ensuring consistent practice.

Some disciplines are subject to regulation (nurses and health visitors, for example) others are not. UKPHR has begun to register practitioners but there is much work still to do. To date 169 practitioners have achieved UKPHR registration. In addition a further 300-plus practitioners are currently in the process of preparing their portfolios for assessment, supported in this work by local schemes.

3. Practitioner registration – what are the benefits?

Practitioner registration offers:

- > **Policy-makers** a consistent vision for and strategic commitment to public health workforce development
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Individual practitioners benefit in terms of personal and professional development as well as the sense of achievement registration brings. There is also a view that registration makes them more employable. Registration provides evidence to colleagues, employers and the public of an assured level of competence achieved.

4. Public health practitioners – why does registration matter?

There are recognised entry qualifications into some disciplines in the core public health practitioner workforce (environmental health and nursing, for example). Public health lacks recognised entry qualifications for a career in public health practice except at the level of public health specialist. This is a problem for individuals seeking a career in public health, for employers recruiting to public health posts and for higher education institutions and training providers wishing to provide courses and qualifications for entry into public health careers.

Practitioner registration addresses this gap because it ensures that competence is assessed and assured according to a consistent set of national standards and a nationally consistent assessment process. Increasing numbers of employers are requiring their public health practitioners either to be registered or working towards registration.

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Practitioner registration is founded on a robust set of standards applied comprehensively and consistently. These standards were developed in collaboration with public health partners using the *Public Health Skills & Knowledge Framework* (PHSKF) as the source document and also drawn from both the *NHS Knowledge & Skills Framework* and the *National Occupational Standards for Public Health*. The standards are pitched at the level of practitioners capable of working autonomously: that is, at Level 5 and above in the PHSKF.³

Registrants are required to maintain a standard of CPD set by UKPHR as a condition of ongoing registration.⁴ We also plan to introduce revalidation. These requirements benefit practitioners because they provide assurance that competence once proved for registration is maintained and updated subsequent to achieving registration.

Currently there are ten local schemes of practitioner registration, including all Wales (also serving Northern Ireland) and West of Scotland (a pilot which is due to end Autumn 2015). UKPHR and scheme coordinators have published a guide to setting up a new scheme.⁵

Evaluation⁶ of the early adopters confirmed:

- Process ensured every registrant fully demonstrated the standards are met
- Each scheme was able to recruit and train adequate numbers of assessors, verifiers and mentors and can run support activities that facilitate completion of portfolios
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8. Practitioner registration – what are the next steps?

Work is required to embed a comprehensive practitioner registration model in the public health system. Wider workforce, new career entrants and current practitioners should see opportunities to build up skills, knowledge and competence. Examples include:

- Public Health Wales is piloting recognition of advanced practice (public health)
- In Wessex and the West Midlands a new ST3 Tutorial Programme will fund registered practitioners to attain ST3 level of the Specialty Training Programme.

In summary, the public policy objective should be for UKPHR to work with the public health system in Scotland to extend the currently highly successful West of Scotland local scheme to cover the whole of Scotland. We also want to work with partners to ensure UK-wide coverage, thus providing enhanced protection for the public, professionals and their employers, and remove the current inequity of access limited by geography.

Please address all responses to this policy briefing to:
David Kidney, Executive Director, UKPHR, 18c McLaren Building, 46, Priory Queensway,
BIRMINGHAM B4 7LR. Tel. 0121 296 4370 d.kidney@ukphr.org

⁷ See evaluation reports, UKPHR website *ibid*

Public health practitioner registration – Policy briefing: WALES

To:

Association of Directors of Public Health (ADPH) Chartered Institute of Environmental Health Department of Health Faculty of Public Health (FPH) Higher Education Institutions	Public Health Wales, its stakeholders & partners Royal Society for Public Health (RSPH) Welsh Council for Voluntary Action Welsh Government Welsh Local Government Association
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Date:	26 August 2015
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Executive summary

Public health practitioner registration is a cost effective way of ensuring that front line public health practitioners meet and maintain quality assured standards of competence. It meets the professional development needs of those intent on public health careers, enables employers to recruit with confidence and protects the public from risk of malpractice.

The public health practitioner standards, and the process against which practitioners are assessed, are set nationally by the UKPHR. In its operation, practitioner registration is devolved to approved local schemes to recruit and support practitioners developmentally. Practitioners prepare portfolios for assessment and experienced public health professionals assess practitioner portfolios against the standards. UKPHR and its moderators ensure consistency and quality assurance through regulating entry onto the Register, training local schemes' assessors and verifiers and providing support and guidance.

Public Health Wales hosts [the local assessment scheme for all public health practitioners in Wales](#). This includes those working across NHS Wales, local government and other public bodies as well as third/voluntary sector and independent sector organisations.

UKPHR believes public policy should be supportive of public health practitioner registration and key partners should collaborate to support it. With a significant proportion of the public health workforce unregulated there is a need to increase practitioner registration. All public health organisations can, and ought to, help UKPHR to safeguard the public, employers and the public health workforce by supporting and contributing to the achievement of more comprehensive practitioner registration in Wales and UK-wide.

1. Practitioner registration – how can you help?

We seek system-wide **recognition of the value of registration**. A united public health system in support of practitioner registration would be beneficial for the public, for the public health workforce and for their employers. This can be achieved through:

- All public health employers referring to **registration in job adverts and job descriptions** e.g. Practitioner registration as “desirable” and “essential”. When we survey registrants, the top opportunity identified is for employers to take registration into account in recruitment decisions.
- Increased **support for practitioners** to complete the local assessment process and apply for practitioner registration.
- Objectives that are aligned to **indicators of effective public health practice** (practitioner standards) for all public health practitioners.
- Wider opportunities to **promote the achievements of registered practitioners** should be instigated to encourage registration and recognition.
- **Valuing the contribution of senior public health professionals** to the devolved local assessment process, in demonstrating their commitment to practitioner registration through the **roles of mentors, assessors and verifiers**. As more practitioners work towards registration there will be an increased demand in local schemes for mentors, assessors and verifiers.
- **Working with Higher Education Institutions** to embed the principles in their curricula which prepare the public health workforce

2. Practitioner registration – what are the next steps?

We want to embed a comprehensive practitioner registration model in the public health system. The wider workforce, new career entrants and current practitioners should see opportunities to build up skills, knowledge and competence. Wales has full coverage – the scheme can be accessed by all practitioners in Wales. In addition to supporting further UK roll-out, the focus of next steps in Wales is to raise the profile of practitioner registration and increase uptake by, and recognition of, practitioners working towards registration.

Public Health Wales is piloting recognition of advanced practice (public health). Evaluation is built in to the pilot and this will enable assessment as to whether this arrangement can be rolled out UK-wide as of 2016-17.

In summary, our aim should be for UKPHR to work with the public health system in Wales, as well as those of England, Northern Ireland and Scotland, to grow practitioner registration where there are already local schemes and to establish new local schemes where none exist currently. Our objective should be enhanced protection for the public, professionals and their employers, and remove the current inequity of access limited by geography.

Please address responses to:

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APPENDIX – PRACTITIONER REGISTRATION IN DETAIL

Defining the public health workforce

Work has been done in the past to map the public health workforce in Wales, but there is no current publication of the numbers involved. For England, the *Centre for Workforce Intelligence* (CfWI, 2014) ¹ estimated England's public health practitioner workforce to be between 35,150 – 39,550 practitioners in a wide range of disciplines. More recently, CfWI has published similar mapping of the public health workforce in Scotland².

Some disciplines are subject to regulation (environmental health and nursing, for example) others are not. UKPHR has begun to register practitioners but there is much work still to do. To date, 169 practitioners across the UK have achieved UKPHR registration. A further 300+ practitioners are currently in the process of preparing their portfolios for local assessment.

Why does practitioner registration matter? What are the benefits?

There are recognised entry qualifications for some disciplines in the core public health practitioner workforce (environmental health and nursing, for example). But the only recognised entry qualification for a public health career is for some public health specialists.

Practitioner registration addresses this gap because it ensures that competence is assessed and assured according to a consistent set of national standards and a nationally consistent assessment process. Increasing numbers of employers are requiring their public health practitioners either to be registered or working towards registration.

Practitioner registration offers:

- **Policy-makers** a strategic commitment to public health workforce development
- **Practitioners** the means of establishing competence in public health practice at a recognised standard benefiting their personal and professional development: a sense of achievement and a view that one is more employable
- **Employers** a benchmark of quality assured standards for practitioners they recruit
- **Commissioners and providers** of public health services a means of specifying a measure of competence, thereby contributing to quality of service and due diligence
- **Higher Education Institutions** an opportunity to provide courses that are directly related to practitioner competences
- **People working towards public health qualifications** an opportunity to undertake courses that are directly related to practitioner competences
- **Members of the public** the ability to check that practitioners are registered.

Registration raises the profile of public health practice, is a bridge between wider workforce and the practitioner workforce, provides a springboard for practitioners wishing to advance further in public health and contributes to making public health careers more attractive.

¹ <http://www.cfwi.org.uk/publications/mapping-the-core-public-health-workforce>

² <http://www.cfwi.org.uk/news/the-cfwi-compiles-report-mapping-the-core-public-health-workforce-in-scotland>

UKPHR - how has it responded?

Practitioner registration is founded on a robust set of standards applied comprehensively and consistently. These standards were developed collaboratively with public health partners using the *Public Health Skills & Knowledge Framework* (PHSKF) as the source document and also drawn from both the *NHS Knowledge & Skills Framework* and the *National Occupational Standards for Public Health*. The standards are pitched at the level of practitioners capable of working autonomously: that is, at Level 5 and above in the PHSKF.³

Registrants are required to maintain a standard of CPD set by UKPHR as a condition of ongoing registration.⁴ Revalidation is also planned. This approach gives ongoing assurance that competence, having been proved for registration, is maintained and updated.

Currently there are ten local schemes of practitioner registration, including a scheme covering all Wales, which also informally supports practitioners working in Northern Ireland.

Evaluation⁵ of the early adopters confirmed:

- Process ensured every registrant fully demonstrated the standards are met
- Each scheme was able to recruit and train adequate numbers of assessors, verifiers and mentors and can run support activities that facilitate completion of portfolios
- UKPHR demonstrated its capacity to provide central support and guidance systems.

UKPHR and scheme coordinators have published a guide to setting up a new scheme.⁶

Practitioner registration – how is it funded?

The current annual practitioner registration fee charged by UKPHR is £95. Funding for local schemes has to date come from an impressive range of contributors, including the NHS, local authorities (corporately and Directors of Public Health) and Universities. The local assessment scheme for Wales is funded by Public Health Wales (PHW) and has assessors and verifiers from PHW and academia.

Practitioner registration – who are the assessors and verifiers?

Senior public health professionals comprise the assessor and verifier capacity. They tell us that they gain from participating in a number of ways:

- They keep up to date with developments in public health practice and maintain their continuing professional development (CPD) as professionally obliged to do
- Volunteers speak of a sense of “putting something back” into public health practice which has given them satisfying careers.⁷

Scheme coordinators report they are able to recruit the assessors, verifiers and mentors they need for the size of their schemes. Senior professionals who fulfil these roles undertake UKPHR’s national standard of training and accept an obligation to attend afterwards regular development sessions. Employers are supportive in allowing time for these duties.

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³ http://www.phorcast.org.uk/page.php?page_id=44

⁴ See UKPHR’s CPD policy and scheme <http://www.ukphr.org/registration/cpd-practitioners/>

⁵ <http://www.ukphr.org/wp-content/uploads/2015/04/UKPHR-evaluation-headline.pdf>

⁶ <http://www.ukphr.org/wp-content/uploads/2014/10/Setting-up-a-Scheme.pdf>

⁷ See evaluation reports, UKPHR website *ibid*