Revalidation scheme

UKPHR’s policy for the revalidation of Practitioner Registrants

1. **Introduction**

Registration with UKPHR is an assurance of competence in public health practice at the time of registration. Revalidation is a means of ensuring that registrants focus on maintaining and enhancing the quality of service they provide and improving their public health practice while registered.

Revalidation is not the only means UKPHR applies for these purposes:

- All registrants must renew their registration annually, making a new **declaration** about a range of matters relevant to competence.

- All registrants must comply with mandatory standards of **Continuing Professional Development (CPD)**.

Revalidation is not a completely new system for UKPHR – there has always been a system of 5-yearly re-registration with which Specialist registrants are very familiar and which some Practitioner registrants have experienced to date. Re-registration involved some of the checks that will also form part of the revalidation process.

Revalidation complements these measures so that they work together in protecting the public and improving practice.
Section 1:

Standards on revalidation

2. In making an assessment that registrants have maintained competence and are engaged in continuous improvement of practice, UKPHR, appraisers and registrants will have regard to the following standards.

This guidance is published by UKPHR and is the source document used by UKPHR when questions relating to conduct and fitness to practise are under consideration. For revalidation purposes, registrants and appraisers should refer to it when seeking to assure themselves that competence is being maintained and enhanced.

4. Whenever a question arises about any aspect of the meaning or interpretation of something contained in UKPHR’s Code of Conduct it is expected that **Good Public Health Practice 2nd Edition 2016** will be consulted. **Good Public Health Practice** was developed in order to provide guidance for multidisciplinary public health practice where **Good Medical Practice** cannot reasonably be interpreted to suit such practice - for example, where there is a need for population based interventions rather than patient focus. The current edition reflects the same professional standards as **Good Medical Practice** but provides guidance on public health practice specifically.

5. **Good Medical Practice 2013** remains a source document in that the standards set out in it are directly applicable to registrants whose public health discipline is medicine, and may generally be of assistance for other registrants. In the latter case, the text will need to be interpreted to meet the differences between clinical practice and public health practice (for example, in relation to population based interventions versus patient-centred clinical practice) where appropriate.
Section 2:

One revalidation scheme but differentiated requirements

6. UKPHR is introducing a revalidation scheme which will apply to Practitioner registrants to the extent set out below.

7. Practitioner registrants will have to undertake UKPHR’s revalidation once every 5 years. This process will replace UKPHR’s current 5-yearly re-registration process. The first practitioner registrants to achieve their registration did so from June 2011 onwards.

   This is a new requirement for public health practitioners and there is no precise precedent for UKPHR’s design of revalidation for this group of registrants. UKPHR has had regard to the revalidation scheme introduced by the Nursing and Midwifery Council (NMC) but in the main the requirements set by UKPHR are those which UKPHR judges most appropriate to be applied in the context of public health practice.

8. The requirements of revalidation for practitioner registrants will be fewer than for Specialist registrants reflecting the lower level of risk associated with the Practitioner role compared with the Specialist role identified in UKPHR’s 2011 risk assessment. This is a proportionate approach to managing risk.
Section 3: Requirements of the revalidation scheme

9. The mandatory elements of UKPHR’s revalidation scheme are as follows:

<table>
<thead>
<tr>
<th>UKPHR’s revalidation process comprises:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Appraisal</td>
</tr>
<tr>
<td>2. Personal Development Planning</td>
</tr>
<tr>
<td>3. Health and Conduct Declaration</td>
</tr>
<tr>
<td>4. Professional Indemnity</td>
</tr>
<tr>
<td>5. Continuing Professional Development</td>
</tr>
<tr>
<td>6. Supporting Information of Quality of Service</td>
</tr>
<tr>
<td>7. Confirmation of Compliance.</td>
</tr>
</tbody>
</table>

_Scheme rules and scheme guidance will explain these 7 elements._

APPRAISAL

10. In this revalidation scheme we will refer to work-based appraisal and to professional appraisal. When we refer to **work-based appraisal** we mean the process by which a manager examines and evaluates an employee’s current and past work performance by reference to pre-set job-related objectives, documents the results, and uses the results to provide feedback to the appraisee. It is used to determine work-related issues such as training needs, promotion and capability. When we refer to **professional appraisal**, we mean a structured, objective assessment of a registrant’s continuing professional competence by reference to the standards relevant to the registrant’s professional status.

11. It is good practice for all members of the public health workforce to be involved in annual **work-based appraisal**. For those in employment this will usually be arranged by the employer. In this revalidation scheme UKPHR makes no requirement in respect of work-based appraisal but there are cross-overs between work-based and professional appraisal, for example in relation to personal development planning. For this reason, UKPHR may ask questions relating to work-based appraisal in the revalidation process but an absence of work-based appraisal will not be a bar to completing the revalidation process.

12. For Practitioner registrants, UKPHR will require at the time of revalidation **one professional appraisal** to have been conducted in the year immediately preceding revalidation (which means that the requirement is for there to be professional appraisal once every 5 years). This professional appraisal should be conducted by someone whose role as an appraiser has been approved by UKPHR. This approval will be generic by reference to criteria such as registration as a specialist with UKPHR, GMC or GDC, assessors and verifiers of local practitioner registration schemes, completion of approved training or other relevant criteria. Practitioners who are in employment may be able to look to their employer to organise and/or pay for their professional appraisal. Practitioners working independently will be required to arrange their 5-yearly professional appraisal.
13. In any event, responsibility for ensuring that annual professional appraisal is completed rests with the individual practitioner registrant.

14. In addition to one professional appraisal once every 5 years, Practitioner registrants will be required to provide evidence annually (at the time they apply for annual renewal of their registration) of:

(1) Quality of service;
(2) Maintenance of CPD and
(3) Reflection on practice.

The requirements in respect of these are set out in the appropriate sections of this revalidation scheme and summarised in the table at the end of this document.

15. At professional appraisal it is expected that the subjects to be discussed will reflect the 7 elements of UKPHR’s revalidation scheme including compliance with CPD requirements and quality of service and improvement of service with supporting information that includes feedback from colleagues, service users and managers and, where appropriate, complaints, comments and compliments. UKPHR will publish guidance on appraisal including specifically guidance about professional appraisal for Practitioner registrants who are self-employed or otherwise whose employer does not facilitate annual professional appraisal.

16. Evidence of compliance with the requirement for a professional appraisal will be by way of provision of a copy of the professional appraisal and Supporting Information that UKPHR will require on revalidation (see SUPPORTING INFORMATION below).

PERSONAL DEVELOPMENT PLANNING

17. It is good practice for all members of the public health workforce to be involved in personal development planning in relation to their work. For those in employment this will usually be arranged, facilitated or supported by the employer. UKPHR will publish guidance on personal development planning for Practitioner registrants who are self-employed or otherwise do not have an employer who operates personal development planning.

18. To achieve revalidation, all registrants must demonstrate that they have been engaged in personal development planning during their time as a registrant.

19. UKPHR will publish guidance on UKPHR’s requirements relating to personal development planning.

20. Compliance is demonstrated by self-declaration in the form required by UKPHR.

HEALTH AND CONDUCT DECLARATIONS

21. UKPHR has a standard declaration form for health and conduct issues already in use on application for registration, annual renewal and 5-yearly re-registration. This form must also be completed and submitted as part of the revalidation process.

22. Compliance is demonstrated by self-declaration in the form required by UKPHR.
23. UKPHR requires registrants to have in place indemnity arrangements so that members of the public are protected from (or compensated in respect of) any service failure.

24. Compliance is demonstrated by self-declaration in the form required by UKPHR.

25. UKPHR has set mandatory CPD requirements for Practitioner registrants as follows:

Practitioners must meet the standard set by UKPHR namely: practitioners must ensure they complete a minimum of 75 hours of relevant CPD, together with reflective notes, over a 5-year cycle. Of the minimum of 75 hours, it is expected that at least 25 hours (1/3rd of the minimum required CPD) will relate to the UKPHR four areas of practice. The remainder of the CPD hours can be self-selected allowing personal choice and development and linked to appraisals and personal development plans (PDP), peer support arrangements or other ways of progressing work-focussed performance objectives. UKPHR has given guidance that practitioners should aim to complete 15 hours of CPD each year, although the test of compliance will be the revalidation requirement once every 5 years that 75 hours of CPD have been completed. A short reflective note (100 - 150 words) must accompany all CPD entries, including those which registrants self-certify.

26. Each year when practitioners apply for renewal of their registration, UKPHR will require declaration that the CPD requirement is being complied with and a statement of how many hours of CPD have been completed in the past year. The latter requirement is for monitoring purposes only and the answer will not affect renewal of registration for another year. UKPHR will require declaration that a reflective note has been written for each CPD entry that has been made.

27. For the purpose of revalidation, Practitioner registrants must demonstrate compliance with the mandatory CPD requirement.

28. Practitioner registrants who undertake the Faculty’s CPD scheme, including the Faculty’s auditing, may produce the Faculty’s certificates of compliance as sufficient evidence.

29. Other Practitioner registrants must produce their full CPD log as evidence of compliance and, in addition, UKPHR reserves the right to require production of evidence in support of some or all of the log entries.

30. See SUPPORTING INFORMATION and CONFIRMATION below for evidence of CPD compliance to be submitted for the purpose of revalidation.
31. All Practitioner registrants must engage in professional appraisal and collect the required **Supporting Information**. The purpose of revalidation is to ensure that:

- Professional competence is being maintained;
- Quality of service is maintained and enhanced; and thereby
- Practice is improved.

Practitioner registrants demonstrating that they have reflected on their competence, quality of service and practice is key to the revalidation process. This is why UKPHR requires the writing of reflective notes. It is also why UKPHR requires **Supporting Information of quality of service**.

32. In order to establish this principle in the revalidation process (and guard against what might otherwise be a risk of the process becoming a box-ticking exercise) UKPHR will require **Supporting Information of quality of service**. In the main, UKPHR would expect the source of such information to be peers operating in public health.

33. On **annual renewal of registration**, the Supporting Information required from a Practitioner registrant will be as follows:

1. Quality of practice – **one form of feedback** from someone who has worked with the registrant (for example, a line manager, a work colleague or a colleague from another organisation) or someone who has assessed the quality of the registrant's practice (for example, a service user, a commissioner of a service or Quality Assurance person);

2. Maintenance of CPD – self declaration that CPD has been undertaken during the past year and the number of hours of CPD completed in the past year; and

3. Reflection on practice – a reflective note written by the registrant reflecting on the feedback.

34. It is in the nature of **professional appraisal** that registrants will produce some illustrative and confirmatory information at their professional appraisal, for the purpose of showing how they are meeting the professional values set out in **Good Public Health Practice and/or Good Medical Practice**. This information may well include multi-source feedback and may be framed within a recognised multi-source feedback tool. Appraisers will focus on what registrants think this information says about their practice and how they plan to develop or modify their practice as a result.
35. In addition, UKPHR will require Supporting Information to be submitted in support of the 5-yearly revalidation process.

36. Where the professional appraisal submitted to UKPHR in support of revalidation includes feedback contained in a multi-source feedback tool UKPHR will accept the rating evidence it contains as sufficient Supporting Information for the revalidation provided that:

   (a) The tool is one from a list of such products which UKPHR has accepted for this purpose and published its acceptance on UKPHR’s website; and

   (b) The completed tool submitted to UKPHR incorporates responses from at least 10 raters.

UKPHR will maintain a list of tools that, if used by registrants, will be accepted by UKPHR as the means of presenting on revalidation the requisite Supporting Information.

If no multi-source feedback tool is used

37. Where a Practitioner registrant has not used, or does not submit, in connection with the professional appraisal submitted to UKPHR in support of revalidation, a listed multi-source feedback tool, UKPHR requires Practitioner registrants to gather and present on revalidation objective evidence of quality improvement activity in the following categories:

   ▪ Feedback from one manager or one commissioner of the registrant’s services
   ▪ Feedback from one recipient of a service delivered by the registrant or one person whom the registrant has collaborated with in delivering a service
   ▪ The registrant’s review of complaints, comments and compliments received within the preceding 5 years relevant to the registrant’s public health practice
   ▪ Reflective accounts by the registrant reflecting on the evidence from the above categories

Whilst some of these will be discussed with appraisers during professional appraisal, all must be accounted for to UKPHR at revalidation in the manner prescribed below.
Supporting Information - all Practitioner registrants

38. UKPHR will require all Practitioner registrants to produce for revalidation, in addition to the feedback, CPD declarations and reflective accounts they will have submitted to UKPHR on annual renewal of their registration:

38.1 Confirmation that UKPHR’s requirements in relation to personal development planning, indemnity insurance and health and conduct continue to be met;

38.2 Confirmation of ongoing fitness to practise;

38.3 Confirmation of compliance with UKPHR’s CPD requirement;

38.4 Confirmation of participation in quality improvement activity.

As set out above, the feedback presented to UKPHR in relation to quality improvement activity may simply be in the format of a multi-source feedback tool of a kind listed by UKPHR for use for this purpose and which will contain feedback from at least 10 raters.

For Practitioner registrants who do not use or do not submit evidence in this format, UKPHR will require production instead of the following feedback in form prescribed by UKPHR:

- Feedback from one manager or one commissioner of the registrant’s services
- Feedback from one recipient of a service delivered by the registrant or one person whom the registrant has collaborated with in delivering a service
- The registrant’s review of complaints, comments and compliments received within the preceding 5 years relevant to the registrant’s public health practice
- Reflective accounts by the registrant reflecting on the evidence from the above categories.

In order for UKPHR to have confidence in the objectivity of the feedback, UKPHR will prescribe the form and content of templates to be used for collecting this Supporting Information.

39. UKPHR may from time to time approve other forms of supporting information and other sources of supporting information for this purpose in the future.

40. UKPHR will publish guidance on the meaning of the terms used for these types of Supporting Information, the persons who should be approached for feedback, the format for such feedback and avoidance of conflicts of interest. UKPHR’s guidance will describe the quantity and quality of information required and give general direction on the range of evidence that will be accepted.
CONFIRMATION OF COMPLIANCE

41. As UKPHR’s revalidation scheme has no base in legislation, there is no system of Responsible Officers to support the confirmation role, unlike for example in the GMC’s revalidation scheme. For this reason, UKPHR will require Practitioner registrants seeking revalidation to provide UKPHR with the name and contact details of one referee.

42. UKPHR will contact the referee to seek confirmation that the registrant has complied with the revalidation requirements in the following respects:

- The registrant has actively taken steps to maintain and enhance skills and knowledge during the preceding 5 years
- The registrant has positively engaged in assessing and taking part in opportunities for CPD
- The registrant has a positive attitude towards quality of service issues.

UKPHR will approach the referee direct with a request to complete and return to UKPHR a reference in form prescribed by UKPHR.

43. UKPHR’s procedure for carrying out revalidation will be as streamlined, standardised and non-bureaucratic as possible, commensurate with:

- Protecting the public from risk;
- Limiting the burden on registrants of form-filling and production of evidence; and
- UKPHR’s modest resources available for operating the revalidation system.

44. For registered practitioners, confirmation of compliance will be achieved as follows:
Confirmation of compliance: **PRACTITIONER REGISTRANTS**

<table>
<thead>
<tr>
<th>ELEMENT</th>
<th>REQUIREMENT</th>
<th>SATISFIED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Appraisal</td>
<td>One professional appraisal completed within 1 year immediately prior to revalidation</td>
<td>Original of the professional appraisal conducted within 1 year immediately preceding revalidation</td>
</tr>
<tr>
<td>Personal Development Planning</td>
<td>Must be participating annually in personal development planning</td>
<td><strong>Self-declaration</strong></td>
</tr>
<tr>
<td>Health and Conduct</td>
<td>Annual declaration as to health and conduct</td>
<td><strong>Self-declaration</strong> by answering in full the relevant questions in UKPHR’s declaration form</td>
</tr>
<tr>
<td>Indemnity arrangements</td>
<td>Indemnity arrangements in place covering practice</td>
<td><strong>Self-declaration</strong></td>
</tr>
<tr>
<td>CPD</td>
<td>Meet UKPHR’s CPD requirement</td>
<td>Faculty of Public Health annual certificates (if FPH’s service is used) covering past 5 years OR production of registrant’s log (and supporting evidence as and when called for by UKPHR)</td>
</tr>
<tr>
<td>Quality of service</td>
<td>Confirmation of participation in quality improvement activity;</td>
<td><strong>Self-declaration</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Annually</strong> feedback, CPD declaration and reflective account and <strong>on revalidation:</strong></td>
<td>Feedback, CPD declaration and reflective account included in annual renewal of registration</td>
</tr>
<tr>
<td></td>
<td><strong>Multi-source feedback</strong> using an approved tool and containing at least 10 raters OR feedback from:</td>
<td>A multi-source feedback tool approved by UKPHR for the purpose OR the feedback listed in the form prescribed by UKPHR for the purpose</td>
</tr>
<tr>
<td></td>
<td>▪ One manager or one commissioner of the registrant’s practice;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ One service user or other recipient of the registrant’s practice including a person collaborated with</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ You - reflective accounts in response to (i) complaints, comments or compliments and (ii) each feedback</td>
<td></td>
</tr>
<tr>
<td>Compliance</td>
<td>Reference to confirm attitude towards skills and knowledge, CPD and quality of service</td>
<td><strong>One referee</strong> put forward by registrant and contacted by UKPHR.</td>
</tr>
</tbody>
</table>

45. **Where UKPHR requires confirmation by way of self-declaration by the Registrant it is crucial to the integrity of UKPHR’s revalidation scheme that declarations are full and honest. Any false declaration will put at risk a registrant’s registration.**
### SUMMARY:
**Confirmation requirements:** PRACTITIONER REGISTRANTS

<table>
<thead>
<tr>
<th>MEANS</th>
<th>REQUIREMENT TO BE MET</th>
<th>COMMENTARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>*<em>Self-declaration <em>”</em></em></td>
<td>5 years’ annual personal development planning</td>
<td>Self-declaration will be relied upon by UKPHR and false declaration may lead to loss of registration.</td>
</tr>
<tr>
<td></td>
<td>Health &amp; conduct questions answered</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Indemnity arrangements in place</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Participation in quality of service discussion</td>
<td></td>
</tr>
<tr>
<td>*<em>Confirmation by documentary evidence <em>”</em></em></td>
<td>One original professional appraisal dated within 1 year of revalidation</td>
<td>Maintaining continuing personal development is an essential component of revalidation as a process not a point-in-time test</td>
</tr>
<tr>
<td></td>
<td>CPD certificates for 5 years (FPH) or CPD log of 5 years CPD activity (be prepared to produce documentary evidence of log entries if requested by UKPHR)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Reflective accounts</td>
<td></td>
</tr>
<tr>
<td>*<em>Confirmation by third party <em>”</em></em></td>
<td>Multi-source feedback accompanying the revalidation application using a tool approved by UKPHR and with at least 10 raters OR feedback in form prescribed by UKPHR: 1 x manager or commissioner 1 x service user or collaborator</td>
<td>UKPHR will maintain a list of approved multi-source feedback tools for the purpose.</td>
</tr>
<tr>
<td></td>
<td>Review of complaints, comments and compliments</td>
<td>The alternative is intended as a means of providing Supporting Information and confirmation in cases where a multi-source feedback tool is not used or submitted to UKPHR</td>
</tr>
<tr>
<td></td>
<td>Reflective notes covering all feedback and all professional appraisal)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>One referee</td>
<td>A referee to be relied on by UKPHR because it has no access to a system of Responsible Officers.</td>
</tr>
</tbody>
</table>

* In addition to annual feedback, CPD declaration and reflective account.

*UKPHR January 2017*