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Emails

Please note as from
20 June 2014 all
emails should be
sent to:

register@ukphr.org

UK Public Health Register will be relocating to Birmingham

UKPHR will be operating out of a new office in Birmingham City Centre. This move will bring to a close a decade-long occupation of a London office in the Chadwick Court headquarters of the Chartered Institute of Environmental Health (CIEH).

Chair of the UKPHR's Board Professor Bryan Stoten explains the move: We chose Birmingham because of its central geographic location, intending this to be a demonstration of our intention to be accessible for the public health community throughout the UK. We also chose it because Birmingham itself is a thriving city which is on the up and has a significant regulatory community already. "We shall continue to have a professional relationship with CIEH at many levels. This professional body makes an effective case on behalf of its members that all the work of Environmental Health Practitioners relates back to and has a bearing on public health.

We have been considering our response to the challenges we face as an organisation, including the Government's policy in favour of statutory regulation of specialists by the Health and Care Professions Council and the growing demand for practitioner registration, and concluded that we need to: restructure, reduce our cost base and rigorously pursue further productivity gains. With these aims in mind, we are planning to reduce our costs in all areas of our activity, relocate our office and upgrade our IT systems.



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Sarah North, Sheila Powell and Andrew James will be leaving the UKPHR at the end of June 2014. We would like to thank everyone who has been involved with the register over the years for their support and assistance. We would also like to wish the UKPHR all the best in the future. All correspondence after 20 June 2014 should be sent to register@ukphr.org

Susan Lloyd and Sarah North - Lithuanian Visit



Lithuania, one of the beautiful Baltic state countries has recently joined the European Union. The country is taking

many steps to maintain pace with world-class developments; one of these is the initiation of a specialist public health register.

The UKPHR has been acting as expert advisor to Lithuanian colleagues, Aldona Jociute and Virginija Kanapeckiene are leading the development of the register. In October 2013 both Aldona and Virginija flew into London for discussions with Susan

Lloyd, UKPHR Chair, Registration Panel. It was very satisfying to be able to share the structures and processes that have been developed to ensure that public health registration in the UK is robust. Our visitors returned to Lithuania laden with knowledge that they duly shared with their Lithuanian Ministers and public health colleagues, both in practice and academics.

This visit also provided a pause in the day-to-day business of UKPHR, a pause during which it was possible to reflect on the progress made in registration in the UK in the last eleven years.

In April 2014 Sarah North and Susan Lloyd were asked if they would kindly present at a national public health meeting in Lithuania.

The meeting was attended by a senior government officer (health) and senior public health colleagues; and the purpose was to agree the format of public health registration.

Our Lithuanian colleagues have decided on an electronic submission process, and are in the process of developing this prior to the register being launched. UKPHR representatives were able to share information on the processes used by the register, along with the paperwork. They were also able to answer many questions raised by the attendees.

Public health regulation is developing throughout Europe and UKPHR is pleased to be on the cutting edge.

Bryan Stoten UKPHR Chair

Notwithstanding the political fireworks going off all around as I write in the aftermath of the European and local elections we are only too aware that the next nine months or so will be dominated by a party political agenda.

The Faculty is already preparing its own manifesto to present to the competing parties. The rest of the wider public health lobby will be specifically highlighting their own agenda - dementia, diabetes, health visiting, tobacco, sexual health...

UKPHR has no such niche concern, however. Rather we will be looking for a proper understanding by all parties that Public Health is shaped by everything done in the political arena and they need to realise it.

The "big picture" is just that - that in public health terms "we count them in and we count them out" and what happens in between is shaped, regulated, licensed, planned for, educated, cared for or influenced by all

the major institutions of our society. That is why Public Health is more than medicine but really is a multidisciplinary programme drawing on the insights of spatial planners, educationalists, civil engineers, housing managers, pharmacists, environmentalists...pointless to go on, because as David Kidney and I discovered, speaking in one County Council, the dog catcher in the back row could point to their legitimate involvement in our agenda too!

So I hope that our Registrants, whatever their political allegiance will at least ensure over the coming months that those who seek to represent and lead us recognise that the measure of their success, once past the ballot box, lies in the emerging epidemiological profile of their constituencies - and the nation.

Important though the sectional interests of public health may be - whether tobacco control, exercise, housing management or community nursing - our effectiveness is

greatest when we recognise we all are signed up to the same agenda: shaping the "choice architecture" in Gladwell's terms of both public bodies and individual citizens. I hope our Registrants will challenge the clichés of political sloganeering and give all those seeking public office "something to think about" showing one bias alone - a commitment to improving health and wellbeing using the evidence base you can provide.

Professor Bryan Stoten

UKPHR Chair



Nairn Wilson UKPHR Registrar



UKPHR is delighted to be launching its continuing professional development (CPD) scheme for practitioner registrants. This development extends the protection of the public provided by UKPHR, and

takes the Register's arrangements for practitioner registration to a new level.

The integral part CPD plays in modern, right-touch regulation is undisputed. It is important, however, that CPD undertaken as a requirement of continuing registration with a regulator provides the intended confidence in the continuing fitness to practice of registrants. To address this issue, the CPD to be undertaken by UKPHR practitioner registrants must include core topic CPD and, importantly, be recorded together with reflections to include learning outcomes and future educational and other personal development needs. While it is understood that most practitioner registrants already participate in various forms of CPD, the new requirement to be actively engaged in such activity on an ongoing basis will reinforce the discipline of keeping up to date and remaining fit for practice and continuing registration.

In monitoring and auditing the CPD activities of practitioner registrants, UKPHR will be anxious to identify ways in which to refine and further develop its CPD scheme for practitioners. Concurrently, UKPHR will seek to be innovative in devising ways to link CPD to future revalidation. Mindful that new requirements for CPD will have certain cost consequences, UKPHR will be anxious that the CPD it requires registrants to undertake is both necessary and cost effective in terms of ensuring continuing fitness to practice and the intended extension of the protection of the public. That said, UKPHR's new CPD requirements for practitioner registrants are minimum necessary attainments, not targets. It is my hope that many, if not most practitioner registrants will comfortably exceed the requirements in the course of fulfilling their many, different roles, and in meeting their professional responsibilities. UKPHR practitioner registrants, existing and future, will hopefully view their necessary engagement in CPD as a good, helpful, professionally rewarding thing to do, rather than a new, burdensome regulatory process to be served. At one and the same time, it is to be hope that both existing and possibly new providers of CPD relevant to Public Health

practitioners will view the launch of the UKPHR practitioner CPD scheme as an opportunity to be forward looking and innovative –the vision being a wide range of attractive CPD activities being available in different formats, ranging from readily accessed, stimulating face to face activities to not-to-be-missed, interactive, remote access events.

With the launch of its practitioner registrant CPD scheme, close on the heels of voluntary register accreditation, UKPHR remains firmly on course to realise its vision of being an effective, modern, 'right touch' regulator, which is viewed by primarily the public it serves to protect as fit to regulate both the existing and future practice of Public Health.

Finally, UKPHR hopes that its action in respect of CPD will be yet another incentive for unregistered practitioners to enter into the regulation provided by the Register – a process which will be greatly facilitated through Public Health organisations and practitioner employers across the UK providing growing backing for the registration processes and local registration schemes.

Professor Nairn Wilson
UKPHR Registrar

Education and Training Committee Welcome New Members

Kathy Elliott Specialist Assessor Representative



I have been registered as a General Specialist since 2005. In 2012 I refreshed my training as an assessor, and have been assessing portfolios over the past two years.

It is a privilege to be an assessor, and I'm continually learning from the work of colleagues, and also reminded of the importance of education, training and experience to be an effective public health specialist. In my career specialist accreditation went from being a distant ambition to a reality. We now have much experience to build on, but also hard choices about which competencies are critical to maintaining effective public health practice. I am looking forward to representing specialist assessors on the education and training committee, and welcome contact from colleagues who I will be representing.

Joanne Newton Practitioner Assessor Representative



I am delighted to be joining the UKPHR Education and Training Committee in the role of Practitioner Assessor.

I have been involved with piloting, developing, implementing and evaluating the Practitioner Portfolio Development Programme in Wessex since its inception and I am an experienced practitioner assessor and mentor. I regard myself as a champion for the programme!

Following the transfer of Public Health to local authorities we will need to ensure that the programme is both available and accessible to a much wider public health workforce, including staff from within the NHS, local authorities and the voluntary and community sectors. To this end, we will need to ensure that the programme takes account of the new challenges in terms of working with different organisational cultures relating to education and training. Although my initial training was in nursing and midwifery, I have worked in health promotion and public health since 1987 and recently obtained registration as an IUHPE European Health Promotion Practitioner (EuHP).

My current post is Public Health Workforce Development Manager for Portsmouth City Council. Previous posts have included: Healthy Schools Co-ordinator, Programme Manager for Teenage Pregnancy, Public Health Manager for the Healthier Communities and Older People component of the Local Area Agreement and Senior Research Fellow in the International Health Development Research Centre at the University of Brighton. I therefore bring a wealth of experience and understanding from the NHS, local authority and academic contexts. I am looking forward to contributing to the work of the Education and Training committee.

Committee Members

Selena Gray
Claire Cotter
Shirley Cramer
Kathy Elliott
Amanda Fletcher
Jeremy Hawker
Linda Jones
Suzanna Matthews
Joanne Newton
Nairn Wilson

Representing

UKPHR
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RSPH
UKPHR Specialist Assessors
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UKPHR
FPH
UKPHR Practitioner Assessors
UKPHR Registrar

West Midlands Public Health Higher Speciality Training Scheme

In line with HEWM's commitment to ongoing development of the Public Health workforce, **ST3 entry** to the Public Health Higher Speciality Training Scheme is now available here in the West Midlands. Expressions of interest are being sought in a proposed scheme for recognising registered practitioners who are working at an "**advanced practitioner**" level of competence (level 7 of the PHSKF) where you would receive support via a bespoke Part A Tutorial programme delivered by a University to enable you to successfully undertake the Faculty of Public Health's Part A exam.

Only practitioners who have been through the West Midlands' Public Health Practitioner Development Scheme and accepted onto the UKPHR's Register would be eligible to apply to the Advanced Practitioner Scheme. Those wishing to apply would need the following:

- Current registration with the UKPHR as Public Health Practitioner (or expected registration within next 6 months)
- Masters in Public Health
- Successful completion of an aptitude assessment in July 2014
- Employer support for your attendance at 16 half-day tutorials between September 2014 and March 2015
- Commitment to train as a UKPHR assessor for the West Midlands' Practitioner Scheme
- Commitment to undertake ,and pay for, the Part A exam in June 2015 (fees approx. £620)

Recruitment would likely commence in July 2014 for a September 2014 start. Practitioners accepted onto the Advanced Practitioner Scheme would participate in a bespoke Part A Tutorial programme delivered by a University in the West Midlands and undertake the Faculty of Public Health's Part A exam in June 2015. The fees for the Part A exam would be **paid by the practitioners themselves** (approx. £620)

For more information please contact Sally James on sally.james@wm.hee.nhs.uk



Spotlight on Dual Registration with Professor Nairn Wilson, UKPHR Registrar and David Landes, UKPHR Dual Registrant

David Landes is a Consultant in Dental Public Health at the Public Health England North East Centre, Training Program Director for the Health Education North East Public Health Training Program, general support within the North East Centre as a members of the Senior Management Team and part of the surge capacity at the Centre to deal with major events, which currently includes being part of the rota to support the management of major incidents.

This article stems from the increasing number of enquiries about the ‘why’ and ‘how’ of dual registration. Dual registration is primarily of interest and relevance to individuals who qualified and entered statutory regulation in one of the healthcare professions, other than medicine (i.e., dentistry, pharmacy, nursing etc) and have subsequently become engaged in the practice of multidisciplinary Public Health, with or without continuing participation in the practice of the profession in which they qualified.

Individuals may question whether registration with their statutory regulator only, best serves their purpose, and keeps as many future career opportunities open to them as possible, or whether entering into dual registration by becoming registered with UKPHR, while retaining their statutory registration, would be a good move. Some individuals, typically those working in multidisciplinary Public Health teams, are coming to the view that registration with UKPHR, together with their statutory regulation, enhances their recognition, standing and value as a team member. A further viewpoint is that entering into dual registration is a demonstration of professionalism and ongoing commitment to the protection of the public, in particular when it comes to satisfying the long-established requirements for re-registration with

UKPHR – the precursor to revalidation. David Landes a Consultant in Dental Public Health for Public Health England, who qualified for specialist registration with UKPHR by virtue of his listing by the General Dental Council (GDC) as a specialist in Dental Public Health (an arrangement covered by a memorandum of understanding (MoU) between UKPHR and the GDC) values his dual registration in fulfilling his roles and responsibilities. He is able to demonstrate, over and above continuing registration with the GDC, commitment to a code of conduct specific to the practice of Public Health and continuing fitness to practice in his current work in which he has responsibilities spanning both dental and generic Public Health.

Commenting on his dual registration David said: “It is a bit of extra work and an additional cost, but well worth it, and a sensible personal choice in an ever changing practicing environment”. Regarding the “extra work” and “additional cost”, UKPHR has work in hand to update existing, and establish new MoUs with the statutory healthcare regulators to agree arrangements to facilitate and clarify arrangements for dual registration. While, at present, UKPHR does not have arrangements with statutory healthcare regulators other than the GDC (setting aside the General

Medical Council in such considerations) for direct entry to either specialist or practitioner registration, it is suggested that a pharmacist, dental hygienist or therapist, nurse or other healthcare professional who is successfully pursuing a career in Public Health should not find it overly onerous to satisfy the requirements for at least practitioner registration with UKPHR. An increase in dual registered would, it is suggested, be a win-win situation for new dual registrants and the protection of the public provided by UKPHR. At one and the same time, it is suggested, that the healthcare professions to which dual registrants belong would be enriched by the inclusion of UKPHR registered specialists and practitioners.

With the prospect of an ever increasing trend to multidisciplinary working and the provision of holistic Public Health services, a rise in dual registration would be a positive development. A further positive development of an increase in dual registration would be opportunity for UKPHR to engage individuals from an increased range of career backgrounds in the further development of regulation specific to Public Health.

Professor Nairn Wilson
UKPHR Registrar

With thanks to David Landes for sharing his personal views in preparing this article

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