UKPHR

Public Health Register

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What's New

UKPHR achieves PSA Accreditation Page 1

North East England Practitioner Scheme Launch **Page 1**

Update on specialist revalidation **Page 2**

North Central and East London Practitioner scheme continues to grow Page 2

Congratulations to UKPHR Registrants **Page 3**

David Kidney answers ,answers, answers... **Page 3**

Denyse King—Featured Registrant talks about her role within Public Health **Page 4**

Em Rahman—Featured Practitioner Scheme Coordinator speaks about Public Health and the Wessex Practitioner Scheme **Page 5**



Independent quality mark for Public Health Specialists and Practitioners

From now on, service users and the public will have the additional reassurance that UKPHR's public health specialist and practitioner registrants belong to a voluntary register vetted and approved by the Professional Standards Authority for Health and Social Care.

UKPHR's voluntary register has been accredited under the Accredited Voluntary Registers (AVR) scheme by the Professional Standards Authority, which is an independent statutory body, accountable to Parliament.

Specialists and practitioners on UKPHR's register will be able to display the Accredited Voluntary Register quality mark, a sign that they belong

UK Public Health Register achieves accreditation

to a register which meets the Professional Standards Authority's robust standards.

UKPHR's Chair, Professor Bryan Stoten says:

"The quality mark will give the public extra peace of mind, knowing that anyone who holds the mark is committed to high standards. UKPHR is pleased to offer the quality mark to all registrants because they meet the far reaching standards of our register, as approved by the Professional Standards Authority."



Harry Cayton, Chief Executive of the Professional Standards Authority said:

"We are very pleased to accredit UKPHR's register of public health specialists and practitioners. Bringing specialist and practitioner registrants into a broad framework of assurance is good for patients, service users and the public and is the best way to promote quality. The scheme offers enhanced consumer protection to anyone looking for health and social care services, and gives these members of the public health workforce the opportunity to demonstrate their commitment to good practice."

Spring 2014

Newsletter

Accreditation does not imply that the Authority has assessed the merits of individuals on the register. This remains our responsibility. Accreditation means that our register meets the Professional Standards Authority's high standards in governance, standard-setting, education and training, management, complaints and information.

As the scheme develops, accredited registers will encompass a growing range of occupations and organisations, and the Professional Standards Authority may accredit more than one register in any particular occupation.

Further information on the accredited voluntary register scheme is available at

www.professionalstandards.org.uk/ voluntary-registers

Professor Bryan Stoten UKPHR Chair



North East Practitioner Scheme Launch

The North East Practitioner Registration Scheme was launched on 29th January 2014 at the Centre for Life in Newcastle upon Tyne. The event was oversubscribed and the 90 attendees were introduced to the scheme by David Kidney, CEO of UKPHR, Professor Ann Crosland of the University of Sunderland and Strategic Lead for Building Public Health Futures, Cerilan Rogers UKPHR moderator, David Chappel of PHE North East and Annie Wallace, the Local Scheme Co-ordinator. The scheme is being coordinated through Building Public Health Futures, the capacity building arm of the School of Public Health North East, where a network has been

developed to support public health practitioners. Interest in the scheme has outstripped all expectations with over 40 people having expressed an interest and 26 practitioners currently working towards registration, representing all twelve local authorities in the North East and a number of Foundation Trusts. At the launch Annie Wallace spoke about how the North East scheme came about through research which identified a need for additional support and development for practitioners. The hope is that practitioners themselves will have a role in deciding how the local scheme operates. Support will be provided in the form of network meetings and learning sets to cover gaps identified by the practitioners. For more information about the North East Scheme contact kate.wilson@sunderland.ac.uk.

UK Public Health Register gains Professional Standards Authority Accreditation



Achieving accreditation as a voluntary regulator was an important milestone for UKPHR. The Professional Standards Authority for Health and Social Care (PSA) accreditation process was thorough,

rigorous and demanding to ensure protection of the public through regulation according to contemporary standards and expectations. This accreditation adds new purpose and value to UKPHR registration. Indeed it is a win-win development for the public UKPHR seeks to protect and UKPHR registrants.

In satisfying the accredited voluntary

register (AVR) standards, it has been necessary for me, as Registrar of UKPHR, to make a number of decisions to amend various registration policies and procedures. The amendments, all of which were supported by the UKPHR Board, as being non-contentious, appropriate and reasonable, have enhanced the regulation provided by the Register, and provided pointers to the ways in which the existing registration policies and procedures may be further modernised in the future – modern, fit for purpose regulation being а constantly evolving set of measures and safeguards. The recent changes made to UKPHR registration policies and

Update on revalidation for Public Health Specialists registered with UKPHR

UKPHR and the Faculty of Public Health (FPH) are continuing to meet regarding the process of revalidation for UKPHR specialist registrants. As these registrants and stakeholders will be aware, a clearer understanding of the proposed statutory regulation of UKPHR specialist registrants and their pending transfer of their registration to the Health and Care Professions Council (HCPC) is awaited. Clarification will inform the next steps to establish revalidation.

Until such time, UKPHR registrants are required to continue with the system of re-registration involving satisfactory evidence of completion of an appraisal, an approved personal development plan, evidence of CPD, and a completed UKPHR application form.

UKPHR and FPH will provide further information on revalidation by the summer of 2014.

procedures have ranged from an update of the annual declaration form completed and signed by all registrants, to the introduction of a complainant's right to appeal against decisions of Fitness to Practise Panels. None of the new arrangements are special to UKPHR, nor make a fundamental change to core principles and approaches. Details of the one change to the Code of Conduct, which requires registrants to ensure appropriate provision for indemnity, have been published on the expanded UKPHR website. Any registrant who has not yet noted, and, if required, acted to comply with this change, is encouraged to do so as a matter of priority.

While I am most pleased that UKPHR has been awarded AVR status, I have no sense of complacency about the ongoing need for continuous quality improvement. Suggestions as to ways in which the robustness and effectiveness of the regulation provided by UKPHR may be improved are always most welcome. The better the regulation, the greater the confidence in the protection afforded, let alone the work and professionalism of the registrants.

The award of AVR status should be viewed as the end of the beginning of a continuous programme of modernisation of regulation provided by UKPHR.

Professor Nairn Wilson UKPHR Registrar

North Central and North East London Practitioner Scheme



Claire Cotter organised another fantastic event which was delivered by Public Health England (London). The event was held at the Royal Society of Public Health, London in order to raise awareness and understanding of UKPHR Public Health Practitioner Registration and how this can support public health practitioners in their career



Claire Cotter

development, and the strengthening of the public health workforce.



Dr Pui-Ling Li, Deputy Director , Systems Delivery PHE

Registration is currently available to practitioners across many parts of the UK, but not yet across the capital. The event proved extremely popular and it is hoped that the scheme will roll out London wide very soon. Details of all the presentations can be found here. <u>www.publichealthregister.org.uk/</u> node/217





Photographs courtesy of Public Health England

David Kidney. UKPHR Chief Executive Answers, answers, answers...



UKPHR's Chief Executive David Kidney spoke at the recent all-London practitioner registration event. David was there all day and heard the questions members of the audience asked. Here David answers some of those questions:

What is the cost to a public health employer of its practitioners applying for registration?

Practitioner registration is remarkably good value for employers. Employers pay no charges directly for their employees to get on the Register (I have heard of only one instance of the employer paying the employee's £95 registration fee). Local stakeholders have paid money to local scheme co-ordinators to maintain a functioning scheme - employers like primary care trusts (previously), local authorities, HEE and PHE have contributed. There is also the non pecuniary cost of allowing employees to do work towards gaining registration during work time. In addition, and most generously, some employers allow employees to give work time to local schemes as assessors, verifiers and mentors. UKPHR really appreciates this incredibly valuable voluntary contribution. There is then a small cost to employers (possibly indirect), but it is important to state also that the benefits to employers are large. Recruitment is made easier where employers can be confident that practitioners have been through an accredited process which assures their employees' knowledge skills, and competence. Employees who undertake voluntary assessor, verifier and mentor roles improve their own skills and knowledge, keep their competence up to date and add greater value to their employers' services.

Is it essential for a practitioner to have line manager support in order to apply for registration?

Some work towards gaining registration will best be carried out during work time and for this to happen the practitioner will need line manager agreement. Employers recognise the benefit to their organisation of employing personnel who are registered and line managers ought therefore to be supportive. If an individual line manager were unsupportive (which is not a situation UKPHR has yet come across), the local coordinator would want to persuade the line manager to be co-operative. If a line manager remained obstructive this would be a serious obstacle but the local coordinator and UKPHR would consider if any alternative arrangement could be made in such an exceptional case to allow registration to continue.

Other questions asked included:

How quickly can practitioner registration be made available UK wide?

UKPHR can only proceed at the speed that local areas are willing to establish local schemes

Is specialist registration still available?

Yes, see UKPHR's website for the available routes

Can commissioners of services register as practitioners the same as providers of services?

Yes

Can a registered practitioner's registered status reflect subsequent public health careers development?

DH has asked UKPHR to develop an Advanced Practitioner standard and the defined specialist standard is available

Is there a CPD requirement?

UKPHR has just completed a consultation on a proposed CPD requirement for all registered practitioners. It is intended that this will become a requirement by the second half of 2014.

Can practitioners submit their portfolios electronically for assessment?

Increasingly, local schemes are putting in place IT systems to facilitate e-portfolios.

For further information please contact David Kidney d.kidney@cieh.org

Congratulations

Congratulations to the following UKPHR Board members and UKPHR registrants who have been involved in producing the Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy

Fiona Harris, Head of Public Health, Surrey and Sussex Area Team NHS England UKPHR Board Member

Professor Richard Parish, Chair, Pharmacy and Public Health Forum **UKPHR Board Member**

Anne Hinchliffe, Consultant in Pharmaceutical Public Health, Public Health Wales UKPHR Registrant and UKPHR Specialist Assessor

Andrew Scott-Clark Director of Health Improvement (Public Health) for NHS Kent and Medway UKPHR Registrant and Registration Approval Panel member

UKPHR Consultative Forum Birmingham 2014

UKPHR will be holding a meeting of the Consultative Forum in Birmingham on Friday 25th April 2014. The event will include a presentation from Birmingham Director of Public Health, Dr Adrian Phillips on 'Birmingham's Public Health Challenges'.

Forum members are now welcome to book places at the Forum meeting (attendance is free) by emailing register@cieh.org

Any Stakeholders or consumer representative groups that are not already members of the Forum are welcome to join. Please contact us to book your **FREE** place.

David Kidney

Congratulations to David Kidney who has been offered honorary FPH membership. David has also been invited to join the Health Education England Advisory Group to give UKPHR's input.



What would you say are your professional strengths

Definitely my cross matrix working within public health combining my midwifery teaching, Patron of Reading in a local school, and outbreak / incident work. I write academically as Denyse King but also write fiction and non fiction books for adults and children using different pen names. I think that being a registered midwife and public health practitioner brings additional kudos to the information I share with readers and listeners.

What route brought you to your role?

I started work in public health as a healthcare acquired infection prevention coordinator after leaving my role as a screening specialist midwife.

Is there a link between Public Health and midwifery?

The links between public health and midwifery are apparent in terms of health promotion and health protection. Both are addressed during antenatal screening, when providing information and support with breastfeeding, and when providing information so that women and their partners can make informed choices in relation to their more general health and wellbeing. I consider myself very fortunate to be employed as a midwifery teacher and therefore able to help shape the thinking and public health knowledge base of midwifery students.

Spotlight on this edition's featured UKPHR Registrant Denyse King

Denyse King is a public health practitioner who works as a Public Health Project Lead within Public Health Portsmouth as well as a Midwifery Lecturer for Bournemouth University. Denyse is a published author who writes academically under her own name as well as writing adult and children's fiction and nonfiction books under different pen names.

What is your main contribution to public health currently?

My main contribution to public health at the moment is via my work as part of the health protection team within Public Health Portsmouth, my role as midwifery lecturer where I teach on all units of the undergraduate curriculum and lead on the postgraduate Maternal and Childhood Obesity (MaCO) unit. As a registered public health practitioner who is a published author and also works as a registered midwifery teacher, I find my public health role is quite varied because public health is irrevocably linked to all three of my jobs.

'Working as an 'expert author' involves promoting health and wellbeing through the avenues of writing textbooks and self-help books.'

Is there anything you would like to highlight in Public Health?

Yes, if you get public health correct from birth then the health and wellbeing improvements can become a cascade of sustainable health which is transferable from parent to child. My work as a registered patron of reading has shown a distinct focus; to facilitate children experimenting with new ways of reading in order to increase their association of reading as a pleasurable activity. There are clear links between literacy and public health; people who are literate and enjoy reading are able to interpret, process and make use of what they read and can make better choices about the food they eat and the lifestyle they lead.





How did you become involved in the Wessex Practitioner Scheme?

I started off as an assessor for the Wessex practitioner scheme and really enjoyed the role working with individuals in assessing their portfolios. It gave me a great opportunity to see the breadth of work that public health practitioners were doing in the region. I also valued what practitioner registration gave individuals, which is, the formal recognition to call themselves a PH professional, which I think is really important for the individual. At the time of being an Assessor I was working as the Regional Health Trainer Lead for the central region of South of England and soon became interested in how we can support health trainers to become registered practitioners and as a result supported some of our health trainers to apply to the programme. In November 2012 I then took over the coordination of the scheme from my predecessor Joanna Chapman-Andrews and since then have been leading on the development and delivery of the scheme in Wessex.

What have been the key achievements for you over the last year?

For me, the development of a more

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structured practitioner programme has been a key achievement which we are currently implementing with our cohort 4 practitioners. This new structure has been developed as a result of the findings from our independent evaluation of the scheme. We have introduced interviews as part of the recruitment process and have included formal review points to ensure our practitioners are on target to complete and have all the support they need in place to enable this.

Our public health wider workforce programme is also another key area of achievement for us, where we have recruited to a post whose remit will be to engage with education commissioners ensuring that public health is considered in all education programmes that are commissioned. The opportunity to influence and embed key public health skills and knowledge into workforces that have a role in promoting health and wellbeing is a really exciting prospect!

What are your views on Public Health in your area?

In the context of public health workforce development, I think we in Wessex are very fortunate to have a good joined up approach to workforce development. Our LETB is very supportive and keen to ensure appropriate development opportunities are in place to support PH workforces in Wessex. The Wessex LETB recognises that Public Health takes place at all levels and therefore we have programmes that not only support specialists and practitioners but also the wider public health workforce. We recognise the importance of CPD and have an established PH network in Wessex to support this. I have also just started a two-day secondment with our PHE Centre on workforce development which I think presents us with some really interesting opportunities in bringing the system together even more in Wessex.

What would you say are the benefits for Practitioners in joining the UK Public Health **Register?**

I think for the individual it provides an opportunity for them to consolidate their work against a set of standards which demonstrates their competence. As mentioned before I think it also provides that formal recognition of being part of a profession, just as social workers or nurses are part of a profession. For the employers I think it simply gives them assurances that their workforces are competent to a level, which has been rigorously assessed and verified.

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Spotlight on Em Rahman, Wessex Practitioner Scheme **Co-ordinator**

Em Rahman is the Scheme Coordinator for the Wessex Practitioner Scheme, which covers Hampshire, Isle of Wight and Dorset



Health Education Wessex