2023-2025 UKPHR fees - consultation report

The consultation opened on the 5th January 2023 and closed on 13th February 2023. 48 responses from individual registrants were received, with no responses from organisations. The response rate was less than 4%, so a very small sample size and likely not representative of the broader registrant pool.

Analysis of each consultation is presented below.

Q1. Registration fees will rise according to the following table:

<table>
<thead>
<tr>
<th>Category</th>
<th>Current fee £</th>
<th>23-24 fee</th>
<th>24-25 fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist</td>
<td>336</td>
<td>366 (+9%)</td>
<td>388 (+6%)</td>
</tr>
<tr>
<td>Specialty Registrar</td>
<td>108</td>
<td>115.50 (+7%)</td>
<td>121 (+5%)</td>
</tr>
<tr>
<td>Practitioner</td>
<td>108</td>
<td>115.50 (+7%)</td>
<td>121 (+5%)</td>
</tr>
</tbody>
</table>

Do you agree with the Board’s proposal?

![Bar chart showing the distribution of responses](chart_image)
Of the 48 respondents, 47 responded to the question and 41 provided further comment. The majority (42%) strongly disagreed.

Understandably there was a recurring mention of the cost of living and how the fees would not be palatable in the current climate. Mention was given to how an increase in fees does not necessarily result in an increase in wages.

There were several comments referring to how an increase in fees for public health practitioners would be a deterrent to maintain registration. This was because practitioners were paid less, and registration is not perceived as a benefit. A similar comment was also made with reference to public health specialists, who acknowledged that UKPHR fees were less than those required by the GMC but also supported pay and terms and conditions parity with GMC registered specialists if fees were to increase.

Suggestions on supporting an increase in fees included (1) quarterly direct debits (the new ROL system will enable renewal fees to be paid in 10 monthly direct debit payments); (2) the public health specialty registrar fee should be higher than public health practitioners because they are paid more; (3) increases in line with inflation rather than above and (4) freezing fees this year.
Q2. The Board’s priorities for 2023-2025 are:

- Review of revalidation requirements
- Introduction of a new IT system which will provide a more user-friendly interface for registrants. This will be cost-saving in the long run, but requires up-front investment
- Development of the e-portfolio for specialist registration by portfolio assessment (SRbPA)
- Implementation of a programme of work designed to promote equality, diversity and inclusion to ensure we operate as a fair regulator, including a review of our governance and decision-making
- Introduction of an apprenticeship route to practitioner registration
- Continuous improvement of practitioner registration schemes to promote broader access and improve the experience of those engaging with the schemes.
- Supporting local initiatives for developing individuals to successfully attain specialist registration through the SRbPA
- Develop, draft, and publish a new strategic plan which will take into consideration the findings of the Value of Registration report.
Do you agree with the Board’s priorities?

Of the 48 respondents, 44 responded to the question and 20 provided further comment. The majority (24%) agreed with the Board’s priorities for 2023-2025. N.B. One respondent responded twice and therefore both responses are counted as one.

Suggestions for priorities included:
- Exploring Advanced Practitioner registration
- Development of the apprenticeship route in all 4 nations to ensure equality of access
- Consulting Directors of Public Health more extensively to get backing of leaders in the public health system

Several comments highlighted that the priorities focused heavily on routes into registration rather than supporting existing registrants and registrants queried whether they would see any benefits of their fees. There were also comments that the omission of public health specialists via the training programme appeared to indicate that this category of registrants was not on the Board’s radar.

Whilst many agreed with the priorities, they questioned why a fee increase would need to fund them, assuming that an increase in registrants will cover costs. It was also suggested that the programme may be over ambitious and a small reduction in some of the priorities could save money and therefore could cancel the fee increase.
A couple of comments were raised on why multidisciplinary public health specialists should be paying toward developments in the public health workforce when medical public health specialists don’t. Another respondent questioned the same point but appreciated the need for all members to support other professional groups within public health.

There also appeared to be some misunderstanding of the priorities as two comments referred to apprenticeships already existing and respondents were perhaps unclear that the priority is for UKPHR to create the infrastructure to register practitioners via the apprenticeship route rather than launching a new public health apprenticeship.

Q3. The Board has decided to increase other fees and charges this year, having left them unchanged since 2020, according to the following table:

<table>
<thead>
<tr>
<th>Other registration fees and charges</th>
<th>Current fee</th>
<th>April 23- March 25</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Practitioner</td>
<td>Specialist</td>
</tr>
<tr>
<td>SRbPA Portfolio Assessment Fee</td>
<td>-</td>
<td>£525</td>
</tr>
<tr>
<td>SRbPA preapplication fee</td>
<td>-</td>
<td>£105</td>
</tr>
<tr>
<td>Admin fee for un-assessable SRbPA portfolios</td>
<td>£0</td>
<td></td>
</tr>
<tr>
<td>Restoration Administrative Fee</td>
<td>£42</td>
<td>£80</td>
</tr>
<tr>
<td>Appeal</td>
<td>£525</td>
<td>£525</td>
</tr>
</tbody>
</table>
Do you agree with the Board’s proposal?

Of the 48 respondents, 44 responded to the question and 24 provided further comment. The majority (40%) neither agreed nor disagreed.

Most comments referred to the steep rise in appeal fees. One comment referred to how the fee is high for practitioners, and this may be almost a whole month’s salary for grades 5 & 6.

Another comment picked up on the report stating that we are going on earning power, however those working towards the SRbPA are not yet earning a consultant level salary and this should be reflected on the SRbPA fees.

Relating to the SRbPA fees, one respondent queried why the costs need to be raised given the assessment is undertaken gratis. It was also highlighted as a potential deterrent to applying as most candidates would be self-funding and for those organisations’ who are supporting funding already have limited financial abilities.

Another commented that the fees should be the same as the training programme as salaries for Registrars are similar to those pursuing portfolio registration.

Some commented that these were one-off fees and recognised the huge amount of admin for UKPHR and therefore it was justified as a one-off expenses. Many others were unable to comment, and the scenarios do not affect them.

Once again, there may have been some misinterpretation of the figures by some respondents as there was a comment on how the restoration admin fee is nearly doubled, whereas the table does not recommend an increase.
Q4. Do you have any further comment in response to UKPHR’s consultation?

13 additional comments. All are listed below:

“It would be useful if you made information regarding tax relief on registration fees more prominent”

“I would welcome some transparency regarding what the fees actually fund? e.g. what is the actual cost of revalidation as I am concerned that I am just subsidizing the other programmes of work”

“It is positive to see the UKPHR being more flexible in its routes to assessment but it must show how it values in members in order to maintain their support. This would be through CDP opportunities or assisting with queries to develop in the field of PH. It must also be more mindful of members personal circumstances when undertaking reassessments and validation, ensuring women are not penalised when on maternity leave”

“thanks for consulting - enjoyed reading the report too”

“Please consider the roles and pay levels of practitioners - many will see these fees and wonder how they can afford them alongside having to complete self-funded masters at grades5,6 & 7. Also ensure that any processes that you amend are sympathetic to devolved nations, where opportunities are not the same i.e apprenticeships”

“Looking forward to the improvements - particularly the IT platform to streamline access and engagement with registration processes”

“As a consultant who did not goes through the portfolio route, it is difficult to see any benefits from my membership of UKPHR, and the hundred of pounds I pay every year. I would be unhappy with paying more fees when I will not see any benefits from this”

“When I’ve had a less than 2% pay rise you’re imposing a 9% increase in fees? Absolutely ridiculous! So out of touch with reality”

“I feel that I do not get any value for money for my annual registration fee. My name stays on a register and that is all I get for it as far as I know. There doesn't appear to be any CPD with it for specialists.”

“Wages are not increasing in line with charges. They are high in the first place”

“It needs to be with PH leaders who are not registered with the UKPHR as they are the ones who can influence and endorse the work of the UKPHR. It needs parity with other regulatory bodies for PH and clinicians and isn't at that point yet. You're talking to an internal audience, which is right, but you need to take this consultation more broadly-starting with all DPHs”

“I think many practitioners may cease to pay for the registration if the fee goes up at this time - I do appreciate the financial pressures on organisations too; however this could be detrimental to the community of current practitioners”

“I do wonder what the point of UKPHR is...it doesn't seem to serve any purpose to me other than to take money off me once a year”

March 2023