



UK Public Health Register

Annual Report
and financial statements **2023/24**

Annual report 2023/24

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Message from Chair and Chief Executive

During the past year, UKPHR continued to grow our Register and to work with our partners across four nations of the UK to address the current workforce challenges. 2023-24 remained a hugely challenging year, where the impact of the Covid pandemic could still be acutely felt. The Board and the UKPHR team worked tirelessly to ensure that public health professionals who are registered, or are in the process of applying with us, felt supported and treated with respect whilst experiencing a process that is fit-for-purpose and cost effective.

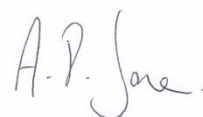
Following a complex project to deliver a new registration system, were able to see the first benefits of it, allowing us access to richer data and better insight capabilities. This new, data-driven Annual report would not be possible without it.

Earlier this year we also published our [Strategy 2024-2029](#). The first of its kind at UKPHR, it reveals a wealth of opportunities as well as some pressing challenges that need to be addressed in the years to come. This report monitors the progress we have already made against the four key themes and focuses on the key statistics to measure it. Future reports will continue along this vein.

This is an exciting trajectory for UKPHR. Our role in the public health landscape is taking shape, and we're evolving to become a modern, data-driven regulator. This report is a landmark output of the first stage of our journey, reflecting a comprehensive review of our work over the past year - highlighting achievements, lessons learned, and areas for improvement. As we look ahead, we remain resolute in our commitment to the regulation of public health, ensuring it is valued, accessible, and effective.



Jessica Lichtenstein
Chief Executive of UKPHR



Andrew Jones
Chair of UKPHR

Part 1: Who we are

UK Public Health Register (UKPHR) is an independent, dedicated regulator for public health professionals in the United Kingdom, providing professional regulation to public health specialists, specialty registrars and practitioners from a variety of backgrounds, all of whom have a common core of knowledge and skills. We are a non-statutory Accredited Register with the Professional Standards Authority (PSA), who have awarded us a Quality Mark.

We operate as a small team of 5.2 full time equivalent staff.

Our Vision:

The public will benefit from excellent public health practice delivered by an effectively regulated multi-disciplinary profession who continuously maintain and enhance their professional competence.

Our Values:

- ***Ensuring public protection***
- ***Achieving fairness and equity***
- ***Promoting transparency and openness***
- ***Enabling resilience through robust regulation***
- ***Facilitating a collaborative approach across the profession***

Part 2: Year in highlights

This Annual Report relates to the financial year 2023/24 and seeks to summarise our work during that period. One of our key achievements was the development and publication (in February 2024) of our new 5 year [Strategy 2024-2029](#). The four strategic themes of the Strategy provide a framework for us to look back at our commitments and will now also allow us to consistently track our progress going forward. They are:

Theme 1 - Maintain, develop, and grow our Register

Theme 2 - Support and enable the multi-disciplinary public health workforce to maintain professional standards

Theme 3 - Promote collaboration across the public health and regulatory sectors to enhance public safety

Theme 4 - Invest in our people and systems

Details of our Strategy and our progress in relation to the commitments made, are contained in Part 3 of this report).

Register and governance snapshot

Our register is composed of three parts: Public Health Specialists, Public Health Specialty Registrars and Public Health Practitioners.

The routes to registration for each of these categories are:

Public Health Specialists:

1. Specialist Registration by Portfolio Assessment (SRbPA)
2. Faculty of Public Health Specialty Training Programme
3. Dual registration

Public Health Practitioners:

1. Retrospective portfolio route
2. Public Health Practitioner Apprenticeship route

Public Health Specialty Registrars:

1. Public Health Specialty Training Programme

More information about the different registration categories and professional titles can be found on our website here: [Join the Register - UK Public Health Register \(ukphr.org\)](https://www.ukphr.org)

On 31 March 2024, UKPHR recorded 1374 active registrants. Our Register has grown steadily over the last five financial years (Fig.0.0.1).

Between 1 April 2023 and 31 March 2024 we registered 144 new Public Health professionals (Fig. 0.0.2).¹

¹ Please note that Public Health Specialty Registrar numbers are not shown on our graphs due to scale – in 2023/24 we registered five Specialty Registrars, bringing the total of active registrants to nine.

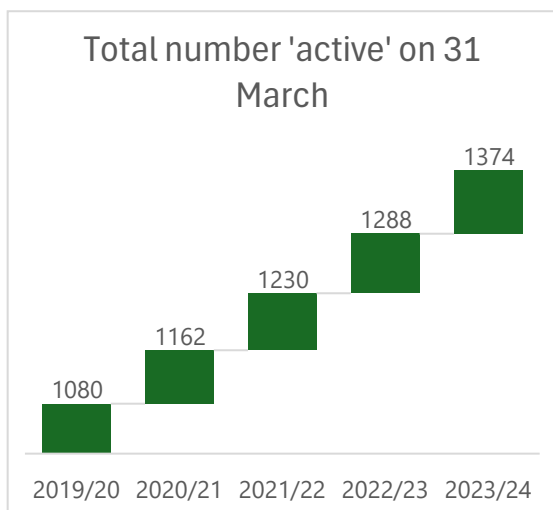


Fig.0.0.1: Register growth in the last five financial years.

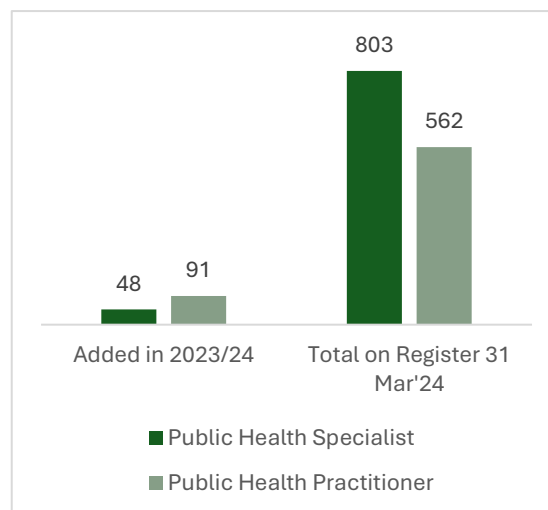


Fig.0.0.2: Registration per registration type, financial year 2023/24

It is worth noting that even though at the end of financial year 2023/24 Public Health Practitioners accounted for only 40% of our Register, they also reflected 63% of all new registrations. Detailed registration figures over the last five financial years are shown in Part 3, section 1).

Other highlights

During 2023-24 we:

- Completed a decision-making review to ensure consistent decisions about registration are being made at the right level
- Delivered training to 55 assessors and 11 verifiers supporting practitioner registration
- Delivered 8 workshops for potential applicants and mentors for specialist registration by the portfolio assessment route
- Initiated a review of our Specialist Registration by Portfolio Assessment (SRbPA) route
- Achieved a successful PSA Accredited Register annual review and approved clear plans for the recommendations and conditions received.
- Delivered staff and stakeholder surveys to better understand how UKPHR is viewed
- Delivered a successful and well-received practitioner conference, with our largest yet attendance and the most award submissions ever received
- Started collecting data from our registrants on protected characteristics
- Developed a new approach to data reporting (as demonstrated by this annual report)
- Received our first apprentice graduate public health practitioner application
- Completed a review of revalidation for specialist registrants and launched a new revalidation process
- Launched a new organisational strategy to cover the next five years, 2024-2029
- Initiated a new piece of work to understand why people leave our Register
- Launched and successfully used a new online registration portal to manage the Register.

PSA Accreditation

In March 2024, the PSA renewed our accreditation for another year. They gave us few recommendations and conditions – we are currently working through them, as part of our working plan:

- To make clearer clearer how people who have gained qualifications and/or experience overseas can demonstrate equivalence with the requirements for registration.
- To document how our interim suspension orders are issued, reviewed, and lifted.
- To consider creating a field on its register showing the registrant's registration with a statutory regulator, if applicable.
- To consider succession planning in our business continuity plans.
- To display the Accreditation Quality Mark on the UKPHR website.

The review also noted two positive findings – the publication of our [Guidance for UKPHR registrants about whistle blowing and the professional Duty of Candour](#) and our [Sustainable Development policy](#)

We are due to be next assessed by March 2027, with our full [Accreditation renewal report](#) published on our website.

Part 3: Progress against our strategy

Theme 1: Maintain, develop, and grow our Register

1.1. Maintain:

1.1.1. Annual Renewal

The key to maintaining our Register is ensuring that our registrants engage effectively in the Annual Renewal process.

Currently, all active registrants are invited to renew their registration between 1 May – 30 June. Registrants complete a declaration form and pay their registration fee, using their online registrant portal.

Moving to automated reminders and an online renewal process has been possible thanks to introducing a new registration system – Registration Online (ROL), in 2023. This change was welcomed by our registrants and allowed a much smoother and effective renewal process.

Until January 2023, Public Health Practitioner renewals were run according to the anniversary of the registration date. Annual Renewal in 2023 was the first time all practitioner registrants renewed their registration at the same time.

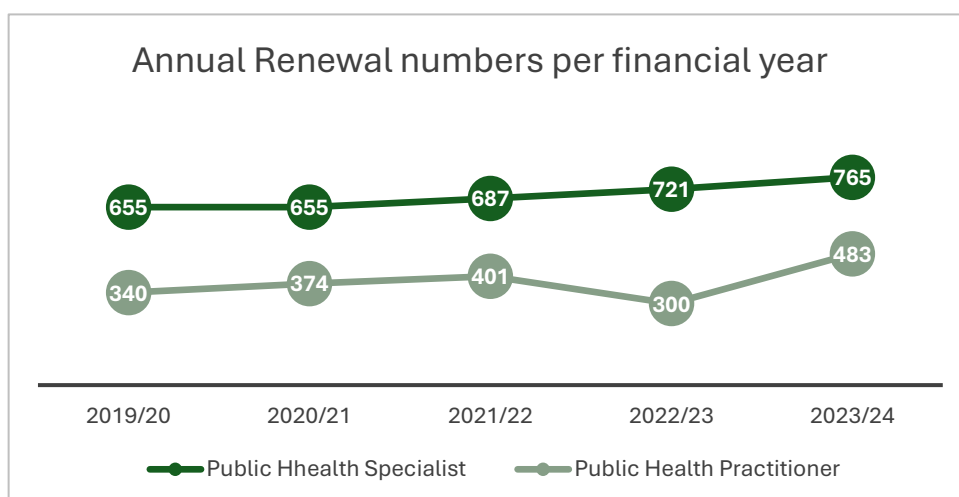


Fig.1.1.1: Annual Renewal completed numbers per financial year. Please note, Specialty Registrar not shown in the chart as numbers are marginal (>10).

From 2024, all registrants who don't renew their registration will be asked about their reasons through a 'Lapsed registrants' survey.

1.1.2. Revalidation.

Public Health Specialists are required to engage in a revalidation process every five years to demonstrate that they continue to meet professional standards, in order to keep their registration current.

From 2023, revalidation applications are submitted through the online portal and completed in ROL. Registrants may request a deferral, and this is considered on a case-by-case basis by the Registrar.

Revalidation year	Invited	Approved	Refused	Deferral requested	Lapsed / relinquished
2019/20	110	95	0	7	11
2020/21 (Covid)	88	16	0	74	<54
2021/22	145	202	0	40	14
2022/23	149	135	0	15	14
2023/24	87	123	0	9	<5

Fig. 1.1.2 Revalidation figures for the last five financial years

Reasons for deferrals

Prior to 2023, before ROL was introduced, registrants requested a deferral via email. There was no standard pro-forma to complete, therefore it is not possible to make systematic analysis of deferral reasons at the time and we therefore only have limited information about the past.

The deferral request rate is consistent at c.10%, with the first year of the Covid pandemic being an exception (84%). In the financial year 2023/24, we granted seven out of nine deferral requests - the reasons for a deferral included: illness, needing extra time to complete the requirements, bereavement, difficulties securing appraisal due to self-employment. UKPHR is aware of the potential challenge for a very small number of registrants in securing appraisal and is seeking to identify potential options.

1.1.3. Re-registration.

Public Health Practitioners are required to engage in the re-registration process to keep their registration current.

Similar to the revalidation process for Public Health Specialists, Practitioners are invited to re-register every five years, to demonstrate that they continue to meet professional standards. Registrants may request a deferral of their re-registration, and this is also considered on a case-by-case basis by the Registrar.

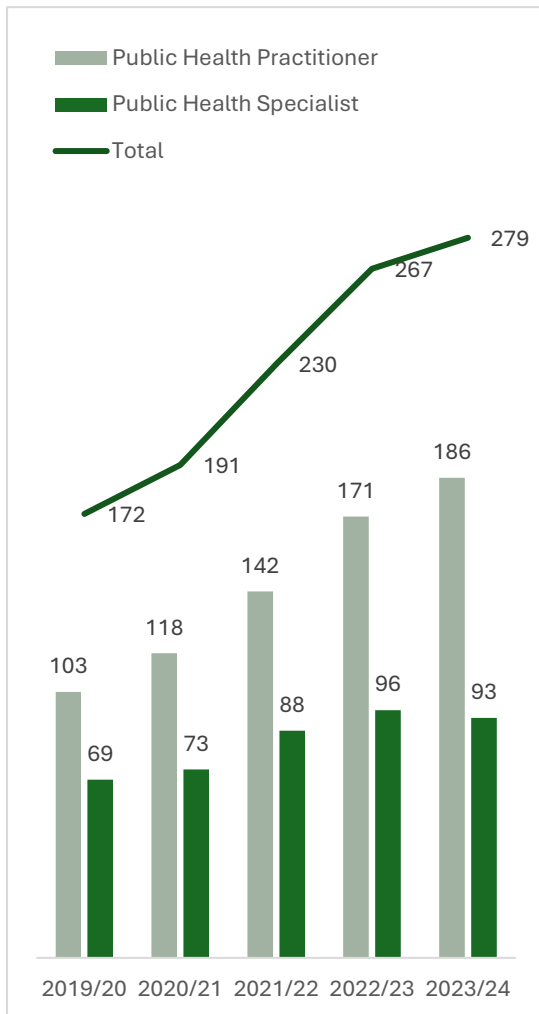
Re-registration year	Invited	Approved	Refused	Deferrals	Lapsed / relinquished
2019/20	24	18	0	0	6
2020/21 (Covid)	41	33	0	38	7
2021/22	65	56	0	6	9
2022/23	80	64	0	6	16
2023/24	59	55	0	6	*6

Fig. 1.1.3 Re-registration figures for the last five financial years

Reasons for deferrals

As with revalidation data, we have been able to analyse the reasons for a request to defer since the last financial year. Out of six deferral requests submitted in 2023/24, four were approved. Examples of reasons for deferral included maternity leave and illness.

1.1.4. Lapsed registrants.



'Lapsed' registration status occurs where the registrant did not fulfil their registration requirements. Most commonly, this is due to non-renewal, however it may also be due to not meeting the revalidation or re-registration requirements. Over recent years, as the number of registrants (notably practitioner registrants) has increased, we have noted an increase in lapsed registrations where no request to restore registration status has been progressed.

It is worth noting that whilst the number of registrants with 'Lapsed' status remained stable amongst Public Health Specialists, it has shown an increase amongst Public Health Practitioners (Fig. 1.1.4). This may suggest different attitudes towards maintaining active registration between these two groups, possibly linked to how employers approach requirements for maintaining an active registration with UKPHR.

We track the numbers of lapsed registrants, however historically it was difficult to understand the reasons for lapsing. From the 2024 Annual Renewal cycle we have started a 'Lapsed registrants' survey, which will provide better clarity going forward.

Fig.1.1.4: Accumulative number of Registrants with 'Lapsed' status on 31 March of subsequent years, per registration type.

1.1.5. Voluntary withdrawal.

Each year we receive a small number of voluntary withdrawal requests (between 20 and 30 requests). With the introduction of ROL, we are now able to track the reasons for this. In the Financial year 2023/24 we received 27 such requests, with registrants able to give more than one reason for why they wish to stop their registration (see Fig. 1.1.5).

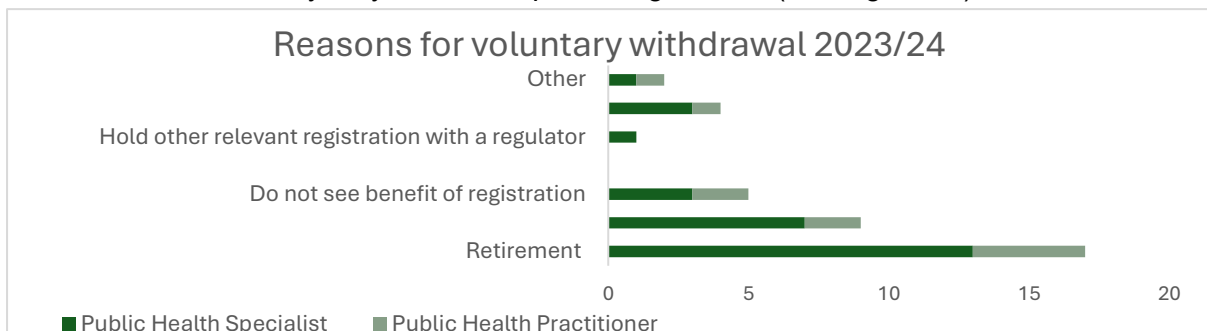


Fig.1.1.5: Reasons for voluntary withdrawal in financial year 2024/25.

We also proactively encourage our registrants to opt for completing voluntary withdrawal application where appropriate, rather than let their registration lapse. This should allow us, over time, to develop a more accurate picture of those leaving the register intentionally and their reasons.

It is worth noting that overwhelmingly, the reasons given related to retirement.

1.1.6 Restoration

Each year we receive a small number of restoration requests. These are mostly submitted once the renewal deadline passes and a registrant registration, lapses due to non-completion of the renewal requirements.

In the financial year 2023/24, we received 49 such requests.

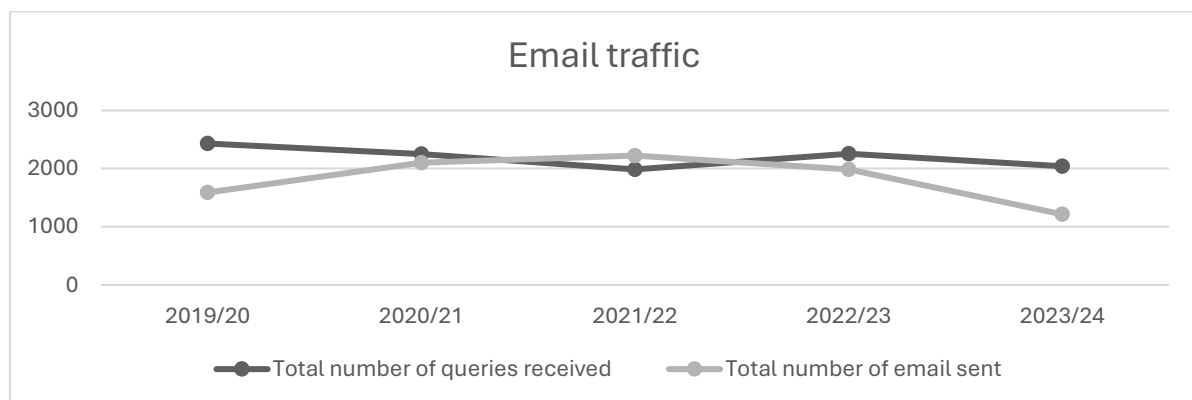
	2019/20	2020/21	2021/22	2022/23	2023/24
Specialist					22
Practitioner					27
Total	32	21	98	54	49

Restoration requests received within one month of the renewal date are processed by the office, with the Registrar reviewing and deciding on more complex cases.

1.1.7 Data relating to incoming registration enquiries.

We receive a high number of external queries daily, via email and telephone. On average, we receive 2192 emails per year, which require some investigation or personalised advice. A large proportion of staff time is dedicated to providing this support

The improvement of our website in 2023 appears to have impacted positively on experience of our registrants and provided efficiencies in our work processes. Since the introduction of ROL last year, registrants also have a choice of messaging us directly using their online portal. These two changes combined, after an initial spike of engagement at the time of change, have resulted in lower numbers of general emails received/sent, facilitating staff to engage more in other support and registration development activities.



1.1.8 Fitness to practise

UKPHR has historically had a very low instance of fitness to practise concerns being reported. This is likely due to several reasons:

- Public health professionals normally work in administrative environments and do not perform clinical work or engage with patients

- Most issues relating to performance are dealt with by employers and are not escalated to the regulator

This year reflected the usual trend of minimal fitness to practise activity. No complaints about registrants were received during 2023/24.

1.2 Develop and grow

1.2.1 Retrospective Portfolio Practitioner registration through local schemes

Retrospective Portfolio Practitioner registration through local schemes is an area that UKPHR are committed to growing. The challenge remains an availability of spaces and ensuring well-funded and supported schemes.

We are currently collaborating with 12 practitioner registration schemes. Over the last five years, there have been some changes in how the schemes are organised and run, however the numbers of applicants coming to registration through this route has remained stable:

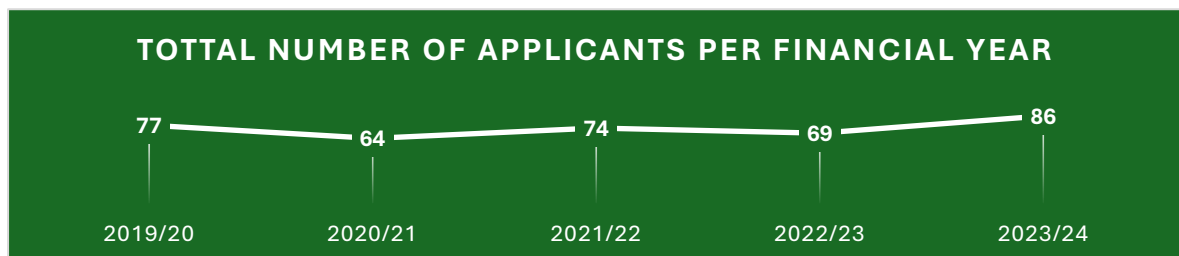
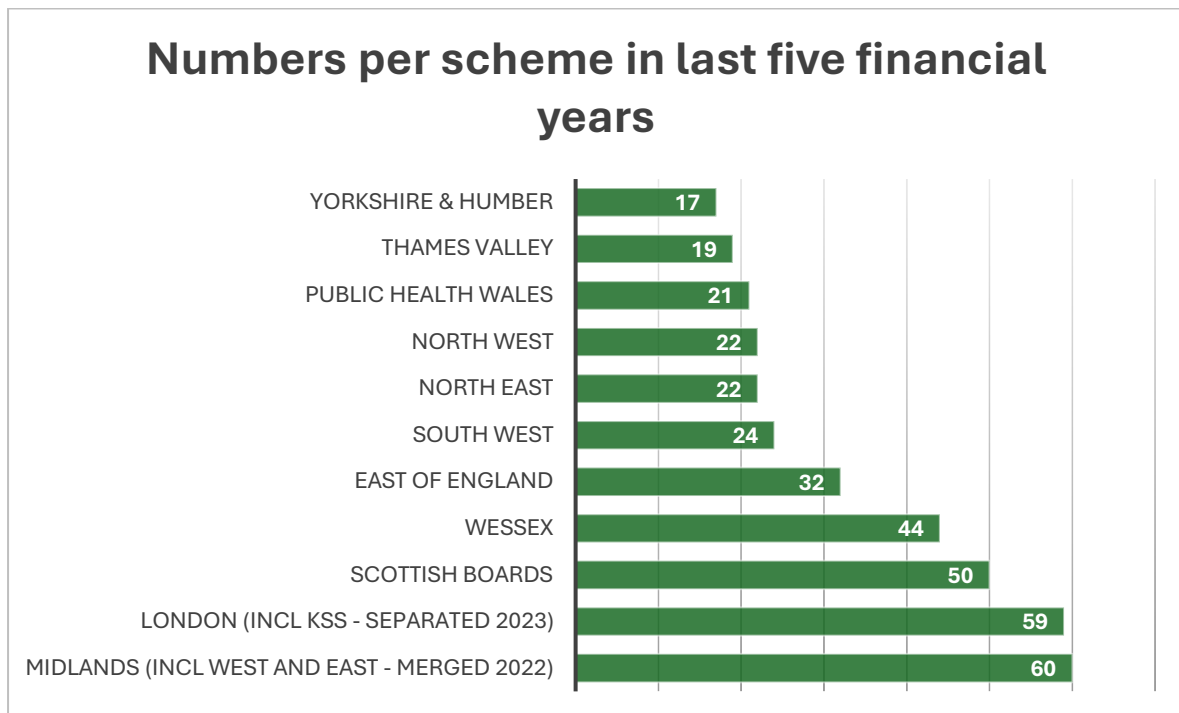


Fig. 1.2.1: Numbers of Retrospective Portfolio Practitioner applications per financial year, per local scheme and in total

In 2022 we created a new role, as part of the UKPHR team, exclusively committed to managing Practitioner registration and the relationship with our local schemes. This resulted in better communication and in time, will help us to gain better insight into how we can support the schemes to create capacity and assist a smoother registration process.

From 1 April 2024 the practitioner moderation team started collating information on all their activities through online data collection forms, and this will be reported in the future (see Section 16 of this report).

1.2.2 New Specialist Registration by Portfolio Assessment (SRbPA)

This route opened in 2018 and introduced a pre-application process, which considers whether an applicant is working at a level appropriate for submission of a full portfolio. This has translated into a good success rate when an application is allowed to progress to a full portfolio assessment:

	2019/20	2020/21	2021/22	2022/23	2023/24
Pre-applications					
New submitted	10	8	13	12	18
Declined	50%	75%	54%	50%	40%
Portfolio assessments					
New submitted	1	1	4	4	6
Declined or un-assessable	0%	0%	75%	25%	0%

Our specialist moderators continued to support the effectiveness of the process through providing detailed guidance, workshops, webinars & podcasts, noting in their recent annual report that the pre-application failure rate dropped markedly in 2023 (more details on the Specialist moderators report in Chapter 22 of this report).

In late 2023 and early 2024, we undertook a light touch review of the SRbPA process, involving a task and finish group that included, UKPHR staff, UKPHR Specialist moderators, UKPHR Specialist assessors and those supporting applicants through the application process, as well as applicants themselves. The meetings and discussion resulted in a list of improvements and clarifications which are being finalised and will be published in Autumn 2024. The competencies that need to be demonstrated remain aligned with the Public Health Training curriculum.

2 Engagement with public health employers

UKPHR continues to engage regularly with all key public health employers in all four countries of the UK including the UK Health Security Agency, Office for Health Improvement and Disparities, NHS England, Public Health Wales, Public Health Scotland, and the Public Health Agency (Northern Ireland). We also work very closely with partner organisations working across the UK including the Faculty of Public Health, the Royal Society of Public Health, and the Association of Directors of Public Health. Our aim is to ensure employers are clear about how their public health teams engage with public health regulation and promote close working, with the aim of supporting our registrants to meet the required professional standards.

3 Specialty training programmes

We want to ensure future UKPHR registrants are supported, prepared, and have a clear registration offer. We work closely with the Faculty of Public Health to ensure public health trainees from multi-professional backgrounds have fair access to training programmes and employment after they complete their training. We wish to encourage all trainees to register with UKPHR during their training period.

4 Articulating and promoting the benefits of registration

We continue to work with the Faculty for Public Health and other key stakeholders to ensure the message about benefits of registration gets through. We wrote jointly with the Faculty of Public Health to all key public health employers outlining why they should continue to support their workforce to gain practitioner registration, and to encourage them to make registration an essential job criteria. Our [report](#), published in autumn 2022 details why registration is so important.

5 Improving registration processes and policies

We want to ensure that registration process and policies remain flexible and fair. The UKPHR team along with the Registrar continually review and update our policies and guidance, referring to the Registration Policy Group, Education and Standards Committee and our Board as appropriate. We operate in line with a set calendar of policy reviews, with ad hoc improvements made as needed.

In the financial year 2023/24 we:

- Created our first Equality, Diversity and Inclusion Plan (EDI Plan) that is under regular review
- Conducted Specialist Registration by Portfolio Assessment (SRbPA) process light-touch review
- Completed a decision-making review, ensuring all registration decisions are made at the right time and at the right level
- Completed a review of revalidation for specialist registrants and launched an updated process
- Reviewed [Language control policy](#), [Sustainable development policy](#), [Reduced fees policy](#), [Vexatious complainants policy](#) and retired two previous guidance documents – Accountability and Transparency, and Adjournment Notices

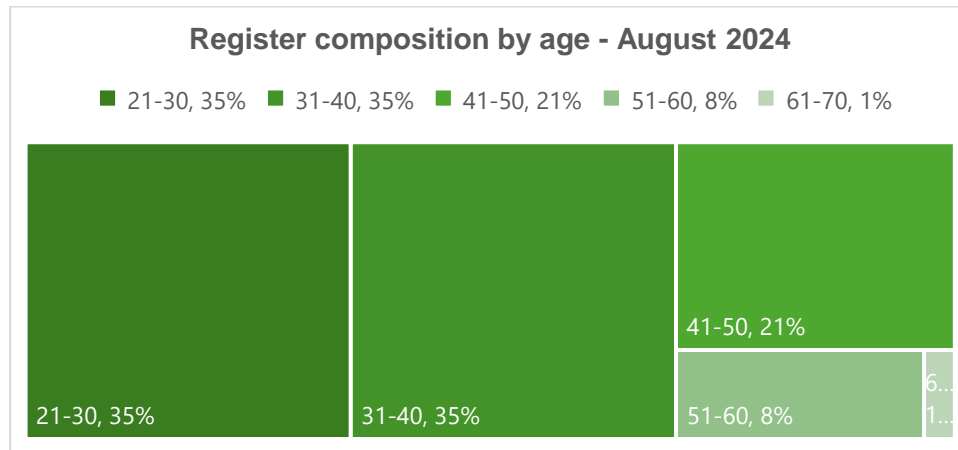
6 Our EDI ambitions

UKPHR wish to further understand registrant and applicant demographics including protected characteristics and we have put in place measures to address these identified issues.

In 2023, we drafted and agreed with the UKPHR Board our 'Equality, Diversity and Inclusion Plan (EDI Plan)'. The plan lists a number of actions across all areas of work and is regularly reviewed. To further our EDI agenda, in December 2023 we asked our professional training provider (Quarterdeck) to produce an EDI video to be used for our panellists and wider workforce who contribute to decision-making. We also held in-house workshops with our office staff and our Board to continue with our learning.

With the arrival of the new registration system (ROL), we were able to start gathering equality and diversity data in a more systematic way. All initial applications for registration now include an optional EDI monitoring form. To ensure that we retain accurate information, during the latest (2024/25) annual renewal process we asked all registrants to provide us with updated EDI monitoring information. All registrants will have an annual opportunity to update the details we have on file.

In the financial year 2023/24, we carried out the new data collection for the first time, and as the form completion was voluntary, the data was still incomplete. We are confident that progressively we will gather and report better insights across all protected characteristics relating to our Registrants, such as ethnicity or gender. Some examples of what data is currently available can be seen below:



Number by declared gender - August 2024

Affected by disability	Number
No	1359
Yes, limited a little	91
Prefer not to say	29
Yes, limited a lot	10

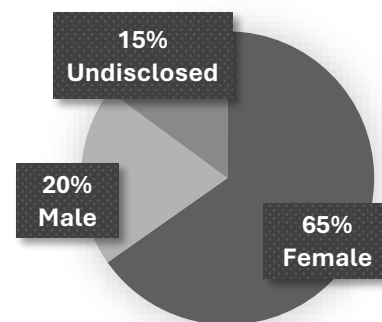


Fig.6.1.1, 6.1.2, 6.1.3: Selection of current (Aug'24) protected characteristics data

Theme 2: Support and enable the multi-disciplinary workforce to maintain professional standards

7 Ensuring clear and accessible information about public health careers

UKPHR has spent considerable time during the past year developing our offer for those who are supporting individuals preparing to come through the SRbPA route. This route is complex and challenging, and local support is a significant success factor. We worked with local programmes in Northern Ireland, London, the North East, and the Midlands to ensure that individuals identified as potentially suitable for specialist registration by portfolio assessment have the information they need to submit a appropriate application. We will continue to work with these local programmes in the future.

We have also been working with other organisations across the UK to ensure that clear and accessible information about public health career pathways is published and accessible. As part of this work, we contributed to the Royal Society of Public Health's (RSPH's) [report](#) on the wider public health workforce, that was published in March 2024.

We are currently working on expanded guidance for public health employers to ensure they are clear about how they can support those who are registered with us and those who are looking to register.

Theme 3: Promote collaboration across the public health and regulatory sectors to enhance public safety

8 Communications

UKPHR is a small organisation, with 5.2 full time equivalent staff. With no dedicated communications resource, all staff are enthusiastic about and engaged with ensuring good communication. Everyone contributes to ensuring our communications are accurate, up-to-date and effective.

In the financial year 2023/24, we:

- Launched a new registration system along with an information campaign to support the transition.
- Carried out a light-touch review of our website.
- Issued two editions of our bi-annual Newsletter – in May and in November 2023. The newsletters were sent to 1325 recipients with the ‘opened’ rate recorded at 55.4%. All members of staff contributed to the content with updates from their respective areas of work.
- Initiated a light touch review of the SRbPA application process. Amended documents and guidance will be updated and published in Autumn 2024.
- Initiated a review of our revalidation process and updated policy and guidance on the improved application process.

We continued to maintain our X (Twitter) account and used it to communicate updates including as our upcoming Practitioner conference and annual renewal information.

9 Practitioner conference

UKPHR have continued to develop and deliver our Practitioner conference, successfully transitioning to an online event, during the pandemic response per

The 2023 conference was held on 4 October under the theme ‘Public health as an inclusive profession’. It included a keynote speech from William Roberts, CEO of the RSPH, a presentation on ‘inclusivity’, four-country break out groups, update from UKPHR, two breakout sessions with a number of options, and our awards presentation and showcase.

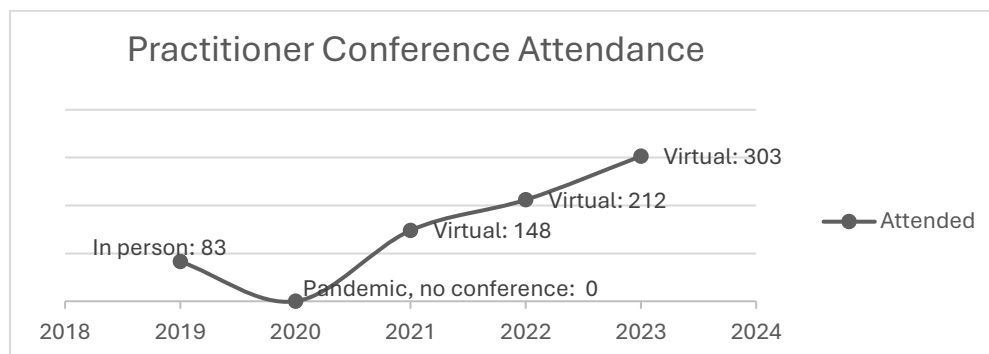


Fig. 9.1: Conference attendance rates.

The conference culminated in UKPHR Innovation in Public Health Awards ceremony, an annual tradition that seeks to celebrate innovative projects in public health and individuals leading them. This was the fifth edition of the awards. We prepared a 'Winners guide' which promotes the winning teams and their achievements – it is published on our website [here](#).

We are returning to a face-to-face conference format in autumn 2024, with further consideration of options for the future.

10 Work to engage or align with wider system/other healthcare regulators.

As the UKPHR has limited resources we seek to utilise and learn from the regulatory expertise of others. We work closely with the General Medical Council in particular, as we share responsibility for most public health specialists. We also monitor very closely the activity of the General Dental Council, who also regulate some public health specialists. There are crossovers in roles regulated by the Healthcare Professions Council and the Nursing and Midwifery Council, many of which have a public health focus. Some of our practitioner registrants will also be dual registered with a statutory healthcare regulator. We aim to align regulation as much as possible, to streamline and simplify the regulatory burden for public health professionals.

The Institute of Regulation also offers a breadth of regulatory resources and expertise, that UKPHR has utilised by participating in a number of roundtables, horizon scanning events, and conferences. Even though the team is small, we are committed to being fully engaged in the wider regulatory landscape.

Our status as an Accredited Register with the PSA also allows us access to several other similarly placed healthcare registers with similar resource challenges. We are committed to sharing resources wherever we can.

11 Other external engagement

Stakeholder survey

In April 2023 we invited 12 stakeholders to respond to our survey: Faculty of Public Health (FPH), Royal Society for Public Health (RSPH), General Medical Council (GMC), Professional Standards Authority (PSA), Institute of Regulation (IoR), UK Health Security Agency (UKHSA), Office for Health Improvement and Disparities (OHID), Public Health Agency (PHA), Public Health Scotland (PHS), Association of Directors of Public Health (ADPH), Public Health Wales (PHW), NHS England.

We received five responses, with the majority agreeing that UKPHR has clear goals and demonstrates openness and transparency in our work. The experience of working with us was very positive, and the office team received praise for their hard work and approachability. The key area for improvement identified was navigating the balance between getting involved in wider workforce activity and being a regulator that is small in scale and has limited resources.

We will continue to issue the survey as an annual event.

Theme 4: Invest in our people and systems

12 Employee survey

The UKPHR office continues to operate as a small, highly specialised team. In the financial year 2023-24 we did not create any new roles, however natural rotation of employees occurred due to one member of staff leaving and needing to be replaced.

At the start of 2024, we launched an employee survey, as part of our commitment to making UKPHR a great place to work. Six employees completed this, receiving overwhelmingly positive feedback. Examples of feedback included: *'UKPHR is a great employer - they listen to staff; we all feel as though we have a say on decisions that affect us and I feel valued as an employee. Working for UKPHR feels like a second family as we all work very well together.'*

Results were shared with our Board.

13 Comments, complaints and compliments

In line with our comments, complaints and compliments we invite feedback and act on it. In the financial year 2023-24 we received no formal complaints and were praised three times for the efficiency of our newly rolled out registrant portal.

14 Learning and improvement in action

Regulator Online Lite (ROL)

The key efficiency achievement of 2023-24, was the IT transition from 4CRM to Regulator Online Lite (ROL) and new registrant portal. The new system automated a lot of processes that previously required manual intervention by staff and gave registrants and applicants new self-service options. It also meant that information can be more centralised as opposed to being held in multiple spreadsheets.

The project costs were approximately £60,000 and the system costs c.£30,000 to maintain/year. Six months after the implementation, we completed an evaluation survey of the new system and processes internally, to quantify the return on investment.

As a result, we estimated that approximately 882 staff working hours are saved annually by using the system, which equates to 126 working days/year across the office team. This translated to a financial saving of approx. £18,000/year in total six months post-roll out. These savings will facilitate a return on investment and allow us to focus on other improvements and developments, to ensure we meet the objectives of our strategy.

We continue to work with the system's supplier Fortesium, to ensure we can reap even more benefits going forward and use the full system capabilities. We are committed to an annual review and system development cycle.

Part 4: Governance update

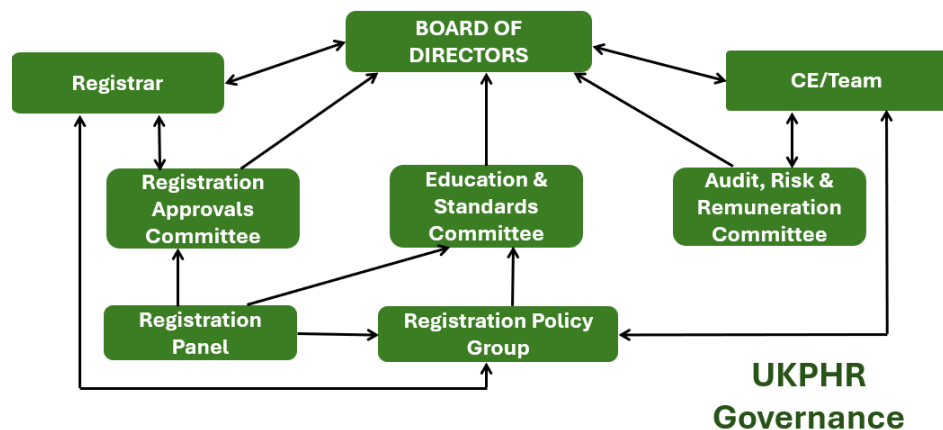
15 Our Board and Committees

In the financial year 2023-24, following the retirement of Viv Speller, we appointed two new Board Vice chairs, Linda Smith and James Sandy. Our Board currently has 13 members, 4 of which, who are lay and do not practice in public health, 3 practice public health but are not registrants, and 6 are registrants.

The Board continued to meet quarterly and virtually, and the Board's Annual General Meeting took place in September 2023 (in person).

Our committees continued to meet virtually according to our governance calendar: Registration Approvals Committee (RAC) met every month, and both Audit, Risk and Remuneration Committee (ARRC) and Education and Standards Committee (ESC) met quarterly. The Registration Panel meets monthly.

Additionally, our Registration Policy Group continues to meet regularly and proves to be a useful forum for early policy, guidance and operation conversations that cut across the different areas of our work.



16 Assessors and moderators

Assessors and moderators continue to support our registration processes and provide us with independent advice and guidance. In 2023-24 we delivered training to 55 assessors and 11 verifiers for practitioner registration and delivered 8 workshops for potential applicants and mentors for specialist registration by portfolio route.

Moderators for both specialists and practitioners produce an annual report, which is considered by the ESC and the Board. Most recent moderator reports are included as an Annex to this document.

Part 5: Financial statements

UKPHR's income from registration fees is reasonably predictable and costs are well controlled. Other income is all derived from the local practitioner schemes, who all contribute to costs relating to training assessors and verifiers as well as general support and conference costs.

Our End of year (EOY) Accounts 2023-24 were presented and signed off by the Audit, Risk & Remuneration Committee in July 2024 and then the Board in September 2024. In the financial year 2023-24, we generated a deficit of £31,406, which had been previously agreed to be deducted from our reserves.

The chief executive has undertaken a review of both costs and income streams with a view to improving financial performance and to build up reserves to the target level. This may take more than one year but the board and chief executive are confident about the future.

Our finances have been assessed as healthy and sustainable. The independent examiner representing Malcolm Willcox & Co Chartered Accountants reported no serious concerns relating to our EOY accounts.

EOY Accounts 2023-24 overview:

Statement of Financial Activities (including income and expenditure account) Year ended 31 March 2024

	2024	2023	
	Unrestricted funds £	Total funds £	Total funds £
Income and endowments			
Membership subscriptions	362,733	362,733	313,971
Charitable activities	95,464	95,464	84,404
Other trading activities	5,547	5,547	4,135
Investment income	3,011	3,011	1,791
Total income	<u>466,755</u>	<u>466,755</u>	<u>404,301</u>
Expenditure			
Expenditure on charitable activities	498,161	498,161	527,939
Total expenditure	<u>498,161</u>	<u>498,161</u>	<u>527,939</u>
Net expenditure and net movement in funds	<u>(31,406)</u>	<u>(31,406)</u>	<u>(123,638)</u>
Reconciliation of funds			
Total funds brought forward	111,287	111,287	234,925
Total funds carried forward	<u>79,881</u>	<u>79,881</u>	<u>111,287</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

Statement of Financial Position
31 March 2024

	2024	2023
	£	£
Fixed assets		
Tangible fixed assets	2	2
Current assets		
Debtors	57,797	91,349
Cash at bank and in hand	102,478	132,040
	<hr/>	<hr/>
	160,275	223,389
Creditors: amounts falling due within one year	80,396	112,104
	<hr/>	<hr/>
Net current assets	79,879	111,285
	<hr/>	<hr/>
Total assets less current liabilities	79,881	111,287
	<hr/>	<hr/>
Net assets	79,881	111,287
	<hr/> <hr/>	<hr/> <hr/>
Funds of the charity		
Unrestricted funds	79,881	111,287
	<hr/>	<hr/>
Total charity funds	79,881	111,287
	<hr/> <hr/>	<hr/> <hr/>

For the year ending 31 March 2024 the charity was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies.

Part 6: Look ahead

As we reflect on a year of changes it is clear that UKPHR is evolving to meet the growing demands of public health regulation. The increased focus on data has provided valuable insights into the needs and expectations of those we register and work with, ensuring that our decisions are informed and focused on the future.

In the coming years, we aim to build on the foundations laid by our new strategy, fostering a culture of continuous improvement. Our focus will be on strengthening collaborations across the public health sector, using better technology to enhance our regulatory capabilities, and driving forward initiatives that prioritise our vision and values.

With a renewed commitment to transparency, inclusivity, and excellence, we are poised to lead the way in shaping a healthier future for our community. As our organisation grows, so too will our impact, ensuring that we remain responsive to emerging challenges and opportunities.

Our journey is beginning, and we look forward to working closely with all our stakeholders to achieve shared goals in the years ahead.

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