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*2<sup>nd</sup> Edition*

# Guidance

## Revalidation of UKPHR's Practitioner registrants

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## Introduction

UKPHR is scrupulous in ascertaining the public health practice competence of all those it accepts for registration. But what about after initial registration?

How can the public, peers, employers and those whom registrants work with (including commissioners of services) be assured that registrants maintain their competence once they have achieved registration?

UKPHR has always sought to address the question of ongoing competence through the application of a range of safeguards.

All registrants must renew their registration annually, making a new declaration about a range of matters relevant to competence. UKPHR also sets mandatory standards of continuing professional development (CPD) which all registrants must meet.

If there are complaints or other evidence which raise an issue of competence concerning registrants, UKPHR will investigate and, if necessary, take action to remedy any established lack of competence and to prevent malpractice.

Until now, registrants have had to re-register every five years at which point UKPHR has required additional evidence relevant to the issue of competence.

UKPHR has witnessed the introduction of revalidation by other regulators, for example the General Medical Council for registered medical practitioners and the Nursing and Midwifery Council for registered nurses and midwives, and has decided to formalise its existing post-registration procedure as an explicit revalidation scheme.

Revalidation will give the public and others confidence that UKPHR and its registrants are committed to maintaining the competence of the core public health workforce, enhancing quality of service and improving public health practice.

## Who is this Guidance for?

1. UKPHR is introducing a revalidation scheme.
2. The revalidation scheme will apply to **Practitioner registrants**.
3. The revalidation requirements for Practitioner and Specialist registrants differ to reflect the respective levels of risk associated with practice and are set out in the guidance for each registration category.
4. Primarily, this guidance is for the use of **Practitioner registrants** to assist them in deciding whether revalidation is required and, if so, with which requirements they must comply.
5. The guidance may be useful also to **employers** of staff registered with UKPHR and required to comply with requirements of the revalidation scheme. Such registrants will look to their employers to assist them in complying with UKPHR's revalidation requirements.
6. The guidance may also be useful for **Practitioner registrants' peers** who are asked by Practitioner registrants to help them collate the Supporting Information they will need to complete their revalidation process, for example those providing feedback on quality of service and those providing references.
7. Finally, this guidance may be helpful to **members of the public** and to UKPHR's public health stakeholders as an aid to their understanding of UKPHR's revalidation requirements as part of a system of Accredited Register regulation.

## What is covered in this Guidance?

8. For Practitioner registrants, UKPHR's revalidation scheme sets out how to renew registration with UKPHR through revalidation every 5 years. The requirements for revalidation are standards set by UKPHR for revalidation and readmission.
9. These requirements will be introduced in a phased manner over the next 3 years. It is intended that they will replace the requirements for 5-yearly re-registration as currently operated by UKPHR.
10. Revalidation:
  - > Is the process that allows you to maintain your registration with UKPHR;
  - > Builds on existing renewal requirements;
  - > Demonstrates your continued ability to practise safely and effectively, and
  - > Is a continuous process that you will engage with throughout your career.

Revalidation complements existing systems for identifying potential issues relating to Practitioner registrants' fitness to practise.

Revalidation is intended to be a process, not merely a test at a single point in time, by which UKPHR, the public and others can be assured that all UKPHR's registrants maintain and build on the competence you demonstrated in order to achieve registration.

11. References in this guidance to paragraph numbers refer to the paragraphs of UKPHR's revalidation scheme as published unless a contrary reference is stated.

## Section 1 - Standards on revalidation

12. As UKPHR's revalidation scheme states (paragraph 2), there are certain sources which provide the standards of practice which will be applied in the revalidation process. Hence, when you make a declaration, supply information or ask third parties for evidence in support of your revalidation (for example, professional appraisal, quality of service feedback or references), UKPHR expects the standards set out in these sources to be applied to the declarations, information, appraisal, feedback and references.

This means that in making an assessment you have maintained competence and are engaged in continuous improvement of practice, UKPHR, appraisers and your peers who provide information – and you - will be expected to have regard to these sources.

### **UKPHR's Code of Conduct 2<sup>nd</sup> Edition March 2014**

UKPHR expects all its registrants to practice public health in accordance with UKPHR's Code of Conduct.

If we receive information or a complaint which raises questions relating to a registrant's conduct and fitness to practise, we will refer to the Code of Conduct in determining whether or not there is any issue we need to consider.

One of the strengths of revalidation is that it reinforces the Code by asking you to use it as the reference point for all the requirements, including your written reflective accounts. This highlights the Code's central role in the core public health workforce's practice and encourages registrants to consider how it applies in your everyday practice.

### **Good Public Health Practice 2<sup>nd</sup> Edition 2016**

This updated publication by UK Faculty of Public Health and UKPHR sets out the standards which apply to the public health practice of all UKPHR's registrants.

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 2<sup>nd</sup> Edition 2016* will be consulted. It 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. When you undergo UKPHR's revalidation, *Good Public Health Practice* provides the underpinning principles as well as amplification of the standards contained in our Code of Conduct.

### **Good Medical Practice 2013**

The publication by the General Medical Council (GMC) of *Good Medical Practice* will be relevant to the practice of some of UKPHR's Specialist registrants. It is unlikely that there will be much cross-over in relation to Practitioner registrants. *Good Public Health Practice* (see above) was designed to complement *Good Medical Practice*. It is unlikely that the standards

set out in the two publications will conflict. However, in the unlikely event of conflict, *Good Public Health Practice* has primacy.

## Section 2 – Practical arrangements

13. For some of the required elements of UKPHR’s revalidation scheme, compliance by Practitioner registrants will be less demanding than it is for Specialist registrants.

The reason for this is that UKPHR’s **risk assessment** in 2011 showed that the risk of harm to the public from public health interventions carried out or directed by Practitioner registrants was likely to be lower than for interventions carried out by Specialist registrants.

14. Accordingly, on the basis that a regulator’s requirements should be **proportionate**<sup>1</sup> UKPHR has sought to match its regulatory requirements appropriately – in some respects differentially between Practitioner and Specialist registrants - to the respective level of risk.

15. Revalidation will replace UKPHR’s current system of 5-yearly re-registration. Some elements of our revalidation scheme will be familiar to registrants who have experienced our 5-yearly re-registration. Other elements will be new. We shall take time to test out the revalidation scheme and its practical arrangements and phase in the replacement of re-registration by revalidation over 3 years.

It is intended that **revalidation will operate 5-yearly** just as re-registration has.

### Requirements of the revalidation scheme

16. As UKPHR’s revalidation policy sets out, the mandatory elements of UKPHR’s revalidation scheme as follows:

1. **Appraisal**
2. **Personal Development Planning**
3. **Health and Conduct Declaration**
4. **Professional Indemnity**
5. **Continuing Professional Development**
6. **Evidence of Quality of Service**
7. **Confirmation of Compliance**

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<sup>1</sup> proportionate in terms of the level of risk that is being addressed and the regulatory burden imposed

## PROFESSIONAL APPRAISAL

17. To achieve revalidation, **Practitioner registrants** must demonstrate that you have been engaged in a professional appraisal within the 12 months immediately preceding your revalidation.
18. If you are **in employment**, you may also be engaged in work-based appraisal but we are clear that this work-based appraisal is a matter first and foremost between you and your employer. Work-based appraisal will very likely relate to assessment of performance by reference to meeting objectives set by management for the achievement of the organisation's goals. We therefore make no requirement about work-based appraisal.
19. It is your personal responsibility to ensure that you meet the requirement for a **professional appraisal**. If you are in employment, your employer ought to ensure that professional appraisal is made available to you. If neither your employer nor any other public health organisation arranges for you to undergo professional appraisal, you must make alternative arrangements. Please refer to the next paragraph of this guidance which is also relevant to any of UKPHR's Practitioner registrants who are not in employment (for example, if you are self-employed).
20. If you are **self-employed or otherwise do not have an employer or other organisation** to arrange for you to undergo professional appraisal, **you will need to make alternative arrangements for your professional appraisal**. This may involve financial cost but professional appraisal is necessary as part of UKPHR's revalidation processes to satisfy UKPHR that you have maintained your competence since your first registration and that quality of service and practice have been maintained and where possible improved.
21. If you have been **away from work** for a considerable period, you may not be able to meet the requirement for a professional appraisal. For example, you may have been out of work, on maternity leave, outside the UK or away from work carrying out caring responsibilities or similar activity at the time when the professional appraisal should have been carried out. In any such case, please alert UKPHR as soon as possible and confirm the extent to which you are unable to comply with this requirement. UKPHR's Registrar is able to amend the requirement so as to require a different process where the professional appraisal is not possible.
22. In all cases, professional appraisal must be carried out by **an appraiser who has been trained** to conduct professional appraisal of public health professionals. A number of organisations provide training to would-be appraisers and UKPHR will maintain a list of known training programmes. UKPHR will also maintain a list of generic categories of persons from which we will accept a professional appraisal.
23. It is the professional and ethical responsibility of you and your appraiser to ensure that there are **no conflicts of interest** in the conduct of the appraisal. If however your professional appraisal is conducted by an appraiser who is also your line manager, this is not an automatic bar and this would need to be declared when submitting your application for revalidation.

24. The professional appraisal must have been conducted **within 1 year of the date for your revalidation** and it must be submitted to UKPHR with all the other evidence required for your revalidation.

## **PERSONAL DEVELOPMENT PLANNING**

25. It is good practice for all members of the public health workforce to be involved in personal development planning in relation to their work.
26. For those **in employment** your employer will usually arrange, facilitate or support a process of personal development planning involving you and line managers and others. Others may include colleagues, representatives of public health partner organisations and service users.
27. For those who are **self-employed** there will be other opportunities to plan personal development, for example through discussions with commissioners of your services, co-providers of services and service users.
28. To achieve revalidation, Practitioner registrants must **make a declaration** that you have been engaged in personal development planning during your time as a registrant.

## **PROFESSIONAL INDEMNITY – PROOF THAT ARRANGEMENT IS IN PLACE**

29. UKPHR requires Practitioner registrants to have in place indemnity arrangements so that members of the public are protected from (or compensated in respect of) any service failure.
30. For Practitioner registrants **in employment** it is likely that the employer will have relevant professional indemnity insurance or will self-insure itself and its employees in this respect.
31. For Practitioner registrants who are **self-employed** there are a number of commercially-available insurance products that would be acceptable to us in satisfaction of this requirement. It is your professional and ethical responsibility to assess and keep under review the monetary value of the insurance cover to make sure that it is sufficient to provide adequate recompense for any and all persons affected by service failure.
32. To demonstrate compliance, you must **make a declaration** that you confirm that indemnity arrangements are in place. We will require this declaration to be made annually, including in your revalidation application.

## **HEALTH AND CONDUCT DECLARATIONS**

33. 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.



34. This health declaration form is being reviewed by us as part of our preparations for the introduction of revalidation. You will be required to answer satisfactorily the answers in the form relating to health and conduct.

## **CPD – PROOF OF COMPLIANCE WITH MANDATORY CPD REQUIREMENT**

35. UKPHR has mandatory CPD requirements with which registrants must comply.
36. **Registered practitioners** must meet the standard set by UKPHR namely:
- Practitioners must ensure they complete a minimum of 15 hours of relevant CPD, together with reflective comments for each CPD activity per year, and 75 hours 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. **Half** should also relate to the individual's PDP;
  - 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;
  - A short reflective note (of a maximum of 150 words) must accompany all CPD entries, including those which registrants self-certify.
37. You must demonstrate compliance with the mandatory CPD requirement. The Faculty of Public Health has developed a practitioner category of Faculty membership which does enable you to undertake the Faculty's CPD scheme as a member if you wish. If you undertake the Faculty's CPD scheme, including the Faculty's auditing, you may produce the **Faculty's certificates of compliance** as sufficient evidence.
38. If you do not undertake the Faculty's CPD scheme, you must produce **your full CPD log** for the 5-year period up to your revalidation as evidence of compliance. In addition, UKPHR reserves the right to require production of evidence in support of some or all of your log entries and you must comply with this requirement.
39. If you have been **away from work** for a considerable period during the 5-year registration period preceding revalidation, you may not be able to meet the CPD requirement in full. For example, you may have been out of work, on maternity leave, outside the UK or away from work carrying out caring responsibilities or similar activity. In any such cases, please alert UKPHR as soon as possible and confirm the extent to which you are unable to comply with this requirement. UKPHR's Registrar is able to amend the requirement so as to allow extra time for compliance.
40. For those Practitioner registrants who use the Faculty's CPD scheme, the Faculty can grant a variation of the annual requirement and we will accept the Faculty's variation.

41. UKPHR's Registrar is able to amend the requirement so as to require reduced CPD in cases where it is genuinely not possible to achieve the full CPD requirement.

## **SUPPORTING INFORMATION OF QUALITY IMPROVEMENT ACTIVITY**

42. It is important to note that the purpose of revalidation is to ensure that professional competence is being maintained and, therefore, quality of service should be maintained or improved at all times.
43. 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 improvement activity**. In the main, UKPHR would expect the source of such evidence to be peers operating in public health.
44. We will require you to provide us, with your revalidation application, **Supporting Information** covering these four areas of our revalidation scheme:
- Your compliance with our CPD requirement
  - Feedback from others relating to your quality improvement activity
  - Your review of complaints, comments and compliments
  - Your reflective accounts of complaints, comments and compliments
45. We ask **employers** (in the case of registrants in employment) to have systems and other types of support in place to help you provide us with information you will need to produce to us for your revalidation.
46. It is your responsibility to submit to us Supporting Information of your quality improvement activity on the subjects and in the format we require. We will publish templates that make transparent the format and the content that we require.
47. **In each year of registration prior to revalidation year** (Year 5) you must:
- (1) Produce **feedback via a Multi-Source Feedback tool OR** in a format set by us in a template for this purpose, from someone who has worked with you (for example, a line manager, a work colleague or a colleague from another organisation) or someone who has assessed the quality of your practice (for example, a service user, a commissioner of a service or Quality Assurance professional);
  - (2) Declare that you have undertaken CPD activity during the past year and state the number of hours of CPD completed; and

Write and submit to us a reflective note, in a format set by us in a template for this purpose, on the feedback that you have obtained. *Please email [register@ukphr.org](mailto:register@ukphr.org) to seek the Registrar's permission to be provided with the requested templates for feedback at your earliest convenience.*

48. In your revalidation year, you are required to produce to UKPHR **the original professional appraisal dated within 1 year immediately before your revalidation.**
49. You will need to answer the questions contained in, and sign, **the declaration form** prescribed by UKPHR. In it, you will be asked to confirm that you are in compliance with UKPHR's requirements with regard to:
- Annual personal development planning;
  - Indemnity insurance; and
  - Health and conduct.
50. You will be required to produce evidence that you are in compliance with UKPHR's mandatory CPD requirement as it relates to you by the means described in the CPD section above – submission to UKPHR of **the Faculty's certificates of compliance** or your **full log of your CPD activity and accompanying reflective notes** for the past 5 years. If you provide your log, it is possible that UKPHR will additionally request sight of some or all of your evidence substantiating the log entries. You must respond to such a request otherwise you will not be able to proceed with your revalidation.
51. You must be able to **sign a declaration** stating that you have participated in **activity relating to quality improvement activity..**

In addition, you will be required to produce **Supporting Information** to demonstrate your participation in activity relating to quality improvement activity (paragraphs 42 - 44).

If you use a **multi-source feedback tool** in connection with your professional appraisal you may produce the resultant rating as your Supporting Information.

The tool must be one that we have approved for this purpose and the rating must be the result of ratings from **at least 10 raters.**

**In any other cases**, on revalidation you will be required to produce:

- Feedback from one manager or one commissioner of your services
  - Feedback from one recipient of a service delivered by you or one person whom you have collaborated with in delivering a service
  - Your review of complaints, comments and compliments received within the preceding 5 years relevant to your public health practice
  - Reflective accounts on the evidence from the above categories.
52. The templates we publish from time to time will detail what we wish those providing feedback to comment upon and what we expect you to cover in a review of complaints, comments and compliments and what we want you to cover in your reflective accounts.

53. Work colleagues who agree to provide feedback for you in support of your revalidation should be colleagues who know your work and can comment on the quality of service you provide.
54. To avoid conflict of interest arising in your choice of work colleague, do not ask relatives or close friends to provide feedback and do not offer to provide feedback for another registrant in return for them providing you with feedback.
55. Anyone in a management position in relation to you, or who has commissioned delivery of a service by you, can provide you with feedback.
56. The template for the provision of feedback must be completed by the third parties whom you ask to provide the required feedback.
57. You should use the template UKPHR publishes for providing your reflective accounts, which you must complete personally.
58. UKPHR may from time to time approve other sources of evidence and other templates for the purpose of ensuring relevant Supporting Information is sought and provided in future. You are asked to be alert to announcements of changes we may make.
59. We will give you advance notice when your revalidation date is approaching and we will at that point advise you of the up to date requirements and up to date templates in use.

## **CONFIRMATION OF COMPLIANCE**

60. Unlike statutory revalidation schemes, such as that operated by the General Medical Council, we have no legal resort to a “Responsible Officer”. Whereas GMC can rely on a system of Responsible Officers with statutory authority to check and sign-off compliance, UKPHR will receive and check Supporting Information itself and we will additionally **require you to provide us with the name and contact details for one referee.**
61. Your referee will be asked by UKPHR to certify his or her knowledge of your work professionally and the validity of the documentary evidence you produce to us. Your referee must be someone who is professionally independent and authoritative. We will contact your referee and, by reference to a template we will publish, we will seek your referee’s confirmation that the information we have received provides an accurate reflection of your work to maintain and enhance your professional competence during the past 5 years of your registration.
62. Your referee cannot be your most recent appraiser.
63. For your convenience, the tables from the scheme are reproduced below.
64. We reproduce here the same table that we published in the revalidation policy for summarising the elements of our revalidation scheme and what the requirements are for you to meet.

## Revalidation requirements: PRACTITIONER REGISTRANTS

ELEMENT	REQUIREMENT	SATISFIED BY
Professional Appraisal	One professional appraisal completed within 1 year immediately prior to revalidation	Original of the professional appraisal conducted within 1 year immediately preceding revalidation
Personal Development Planning	Must be participating annually in personal development planning	<b>Self-declaration</b>
Health & Conduct	Annual declaration as to health and conduct	<b>Self-declaration</b> by answering in full the relevant questions in UKPHR's declaration form
Indemnity arrangements	Indemnity arrangements in place covering practice	<b>Self-declaration</b>
CPD	Meet UKPHR's CPD requirement	Faculty of Public Health annual certificates (if FPH's service is used) covering past 5 years <b>OR</b> production of registrant's log with accompanying reflective notes (and supporting evidence as and when called for by UKPHR such as certificates)
Quality Improvement Activity	<p>Confirmation of participation in quality improvement activity;</p> <p><b>Annually</b> feedback, CPD declaration and reflective account and <b>on revalidation</b>:</p> <p><b>Multi-source feedback</b> using an approved tool and containing <b>at least 10 raters</b> <b>OR</b> feedback from:</p> <ul style="list-style-type: none"> <li>▪ One manager or one commissioner of the registrant's practice;</li> <li>▪ One service user or other recipient of the registrant's practice including a person collaborated with</li> <li>▪ You - reflective accounts in response to (i) complaints, comments or compliments and (ii) each feedback</li> </ul>	<p><b>Self-declaration</b></p> <p>Feedback, CPD declaration and reflective account included in annual renewal of registration</p> <p><b>A multi-source feedback tool</b> approved by UKPHR for the purpose <b>OR</b> the feedback listed in the form prescribed by UKPHR for the purpose</p>
Compliance	Reference to confirm attitude towards skills and knowledge, CPD and quality of service.	<b>One referee</b> put forward by registrant and contacted by UKPHR.

**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.**

65. We reproduce here the same table that we published in the revalidation policy for summarising the means by which you will be required to satisfy the requirements of our revalidation scheme.

## **SUMMARY:**

### **Compliance requirements: PRACTITIONER REGISTRANTS**

<b>MEANS</b>	<b>REQUIREMENT TO BE MET</b>	<b>COMMENTARY</b>
<b>Self-declaration *</b>	5 years' annual personal development planning  Health & conduct questions answered  Indemnity arrangements in place  Participation in quality of service discussion	Self-declaration will be relied upon by UKPHR and false declaration may lead to loss of registration.
<b>Confirmation by documentary evidence *</b>	One original professional appraisal dated within 1 year of revalidation  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)  Reflective accounts	Maintaining continuing personal development is an essential component of revalidation as a process not a point-in-time test
<b>Confirmation by third party*</b>	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  Review of complaints, comments and compliments Reflective notes covering all feedback and all professional appraisal  One referee	UKPHR will maintain a list of approved multi-source feedback tools for the purpose.  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  A referee to be relied on by UKPHR because it has no access to a system of Responsible Officers.

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