

TRUST-WIDE NON-CLINICAL POLICY DOCUMENT

VERIFICATION OF STATUTORY REGISTRATION OF TEMPORARY AND PERMANENT STAFF

Policy Number:	HR08
Scope of this Document:	All staff who are required to be registered to undertake their role (excludes medical staff)
Recommending Committee:	HR Policy Group
Approving Committee:	Executive Committee
Date Ratified:	November 2016
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Version Number:	2016 – Version 2
Lead Executive Director:	Executive Director of Workforce
Lead Author(s):	Head of Human Resources

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2016 – Version 2

Quality, recovery and wellbeing at the heart of everything we do

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PROCEDURE FOR THE VERIFICATION OF STATUTORY REGISTRATION OF TEMPORARY AND PERMANENT STAFF

Further information about this document:

Document name	PROCEDURE FOR THE VERIFICATION OF STATUTORY REGISTRATION OF TEMPORARY AND PERMANENT STAFF (HR08)
Document summary	This procedure outlines the process that needs to be followed to verify that appropriate staff employed by Mersey Care NHS Foundation Trust have statutory registration.
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To be read in conjunction with	HR0-1 Disciplinary Procedure NHS Employment Check Standards
This document can be made available in a range of alternative formats including various languages, large print and braille etc	
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Version Control:

		Version History:
1		March 2015
2		November 2016

SUPPORTING STATEMENTS – this document should be read in conjunction with the following statements:

SAFEGUARDING IS EVERYBODY'S BUSINESS

All Mersey Care NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and vulnerable adults, including:

- being alert to the possibility of child/vulnerable adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child/vulnerable adult;
- knowing how to deal with a disclosure or allegation of child/adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child/vulnerable adult concern;
- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors* or the trust's safeguarding team;
- participating in multi-agency working to safeguard the child or vulnerable adult (if appropriate to your role);
- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session

EQUALITY AND HUMAN RIGHTS

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the *protected characteristics* of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy /maternity and marriage/civil partnership.

The trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major employer. The trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Mersey Care NHS Foundation Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

Mersey Care NHS Foundation Trust is committed to carrying out its functions and service delivery in line the with a Human Rights based approach and the FREDA principles of **Fairness, Respect, Equality Dignity, and Autonomy**

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1. PURPOSE AND RATIONALE

- 1.1 The purpose of this policy is to:
- 1.2 Outline the procedure within Mersey Care NHS Foundation Trust for verifying the statutory registration of its staff.
- 1.3 To clarify the responsibilities for staff in maintaining their professional registration. To outline the action to be taken in cases of registration lapses.
- 1.4 The policy applies to all clinical staff who are required to maintain professional registration.
- 1.5 This policy should be read in conjunction with the following documents:
 - NHS Employment check Standards
 - DOH Guidance re professional registration requirements
- 1.6 All qualified temporary and permanent clinical staff employed by Mersey Care NHS Foundation Trust are required to be registered to practice with their relevant professional and regulatory body
- 1.7 **Rationale** – To ensure that individual's fulfil the requirements of registration, protect patients and ensure continuing development of individual's employed by the Trust.

2. SCOPE

- 2.1 This procedure applies to all clinical staff who are required to maintain professional registration.

3. DEFINITIONS

- (a) The relevant terms and their definitions (within the context of this policy document) are outlined below:

Table 1: Definitions

Term	Definition
ESR	Electronic Staff Record
GMC	General Medical Council
GPHC	General Pharmaceutical Council
GSCC	General Social Care Council
HPC	Health Professions Council
HR	Human Resources
NMC	Nursing and Midwifery Council

4. DUTIES

- 4.1 Staff are responsible for ensuring that their professional registration is maintained. The Trust will undertake monthly checks of the professional registration of staff, and reminder letters will be sent out to staff accordingly, however it remains the individual's responsibility to maintain their registration.
- 4.2 **Trust Board** – The Chief Executive has delegated responsibility for ensuring compliance with “The NHS Employment Check Standards” to the Director of Workforce.
- 4.3 **Lead Executive Director** – the Executive Director of Workforce has strategic responsibility for ensuring compliance with “The NHS Employment Check Standards”.
- 4.4 **Policy Lead** – the Policy Lead, The Head of Workforce, has operational responsibility for ensuring that a robust system is in place, which will routinely check the professional registration of all professional workers. They will also ensure that all Directors, Managers, Human Resource Managers, Resourcing Team members and staff are fully aware of the actions contained within the “The NHS Employment Check Standards” and the Professional Registrations Policy and are aware of their responsibilities.
- 4.5 **The Recruiting Manager** has the duty to ensure that all posts requiring a professional registration are checked during the interview process. A valid PIN **number must be checked, and** identification and qualifications must be seen.
- 4.6 **Transactional Team** - The Transactional Team undertakes a monthly review of all registrations that are due to expire within that specified month by generating a report from the Electronic Staff Record system (ESR).
- 4.7 **Resourcing Team** - The Resourcing Team has the duty to ensure that after appointment the successful candidates registration is verified with the appropriate professional body e.g. NMC, or regulatory body, e.g. HPC.

No offer to appoint will be made until all checks have been carried out.

The Resourcing Team will cross check the status of each registration with the database held by the relevant professional body on recruitment.

- 4.8 **The Workforce Directorate** will send two reminders via email to the member of staff whose registration is due to lapse within that specified month. The names of staff who are issued with a second reminder email will be given to the relevant Human Resources Business Partner /Manager/Advisor to take to the employees immediate Manager so that the Manager can highlight this issue with the member of staff. If a registration has not been renewed by its renewal date the Transactional Team will notify the designated Human Resources Business Partner/Advisor who will take this forward for Disciplinary Investigation.

4.9 Managers

It is the responsibility of Divisional Managers/Heads of Service to ensure that line managers are aware of the need to follow pre and post appointment procedures which are compliant with “The NHS Employment Check Standards.”

4.10 Staff (Temporary and Permanent)

- 4.10.1 The member of staff has the ultimate responsibility to ensure that they have an appropriate and up-to-date registration to practice within the Trust. Failure to re-register will lead to a fact-finding investigation in line with the Trust Disciplinary Procedure and may result in disciplinary action being taken (please refer to the disciplinary procedure – HR01, 12 (k) page 13).
- 4.10.2 From April 2016 all registered nurses are required to undertake a revalidation process on a three yearly basis. This replaces previous notification and practice procedures. Further information is available on the PACE section of our website. (<http://www.portal.merseycare.nhs.uk/sites/PDR/SitePages/Home.aspx>.) The revalidation tile provides detail. Pure bank staff can access support directly from the Director of Nursing Office.
- 4.10.3 There are some actions that the Trust will take, in the form of a reminder email system, to assist in ensuring that all members of staff of the Trust maintain appropriate registration. However these actions are primarily for the benefit of the Trust in order to minimise the risk that the Trust is employing staff without appropriate registration. No act or failure to act by the Trust in relation to any reminder system operated by the Trust affects in any way the individual responsibility to maintain appropriate professional registration.
- 4.10.4 It is the responsibility of all professional practitioners to provide evidence of registration at the Pre-Employment stage of recruitment. Ultimate responsibility lies with the employee to maintain current registration with their professional body. This is a condition of their Terms of Employment. This would include:
- Submitting notification of intention to practice;
 - Providing the necessary evidence required by the appropriate professional or regulatory body to support remaining on the register;
 - Evidence requirements to confirm registration would be a valid PIN number, verified via the relevant professional or regulatory body, in addition to 'Statement of Entry' notification;
 - For psychologists, a valid practicing certificate.
- 4.10.5 It is a requirement that all staff notify their future/current NHS employer immediately if they are:
- Currently the subject of any investigation or proceedings by any body having regulatory functions relating to health/social care professionals including such a body in another country;
 - Has ever been disqualified from the practice of a profession or required to practice it subject to specified limitations following fitness to practice proceedings by a regulatory body in the UK or in another country.

Any failure to provide this information will lead to disciplinary action. (See HR01: Disciplinary Procedure)

5. PROCESS / PROCEDURE

5.1 Procedure for checking verification of all clinical staff, both permanent and temporary, upon commencement of employment

- 5.1.1 The registration of all relevant employees must be checked at the commencement of employment as part of the recruitment process. This is achieved by accessing the relevant website. Evidence

which details the date of registration and the expiry date, in the form of a print-off from the relevant website should be produced and placed on the individual's personal file. This will be done by the Resourcing Team. This will then be entered on the individual's record on ESR, the Trust's HR information system.

5.1.2 New employees must not be offered a contract of employment with Mersey Care until their registration has been verified, as outlined above.

5.1.3 A chart detailing responsibility for particular staff groups is given at Appendix A.

5.1.4 The Additional Staffing and Medical Staffing Teams will also check the registration of all Agency/Locum workers prior to commencement of any work undertaken on behalf of the Trust.

5.2 Procedure for monitoring registration of clinical staff employed by Mersey Care NHS Foundation Trust

5.2.1 Once registration has been verified upon commencement of employment, it is important that registration remains valid.

5.2.2 It is the individual employee's responsibility to retain registration with their professional and regulatory body.

5.2.3 The Trust has a role in supporting staff in actioning this. Checks will be made on a monthly basis to ensure that the Trust has an up-to-date record of registration of staff. This will be achieved by the Transactional Team producing monthly reports from ESR to highlight those staff with registration due to expire within the following month. A first reminder email will be sent out to the member of staff during the first week of the month prior to expiry. The Transactional Team will then check on the appropriate website, during the specified month of expiry, to see whether registration renewal has taken place. If registration renewal has not taken place, the Workforce Department will write out to the member of staff again to via email to remind them about registration and to advise them of the consequences of a lapse in registration. HR Business Partners/Advisors will be notified of staff who have been issued with a second renewal reminder email. A further check will then be carried during the week of the expiry date. If renewal has not occurred, a final check will be made on the day prior to expiry.

5.2.4 Once the registration has been renewed the new renewal dates will then be entered onto ESR to enable future checking to be undertaken.

5.2.5 Employees will receive their own reminders from the professional and regulatory body they are registered with. The Trust takes registration very seriously and all reminders provided by Mersey Care NHS Foundation Trust are primarily to ensure that the Trust fulfills its duties and responsibilities in relation to upholding professional standards. For the avoidance of doubt, no failure in the Mersey Care NHS Foundation Trust checking and reminder system absolves the individual employee of any of their responsibility in relation to registration. The Trust checking and reminder system is an additional resource only.

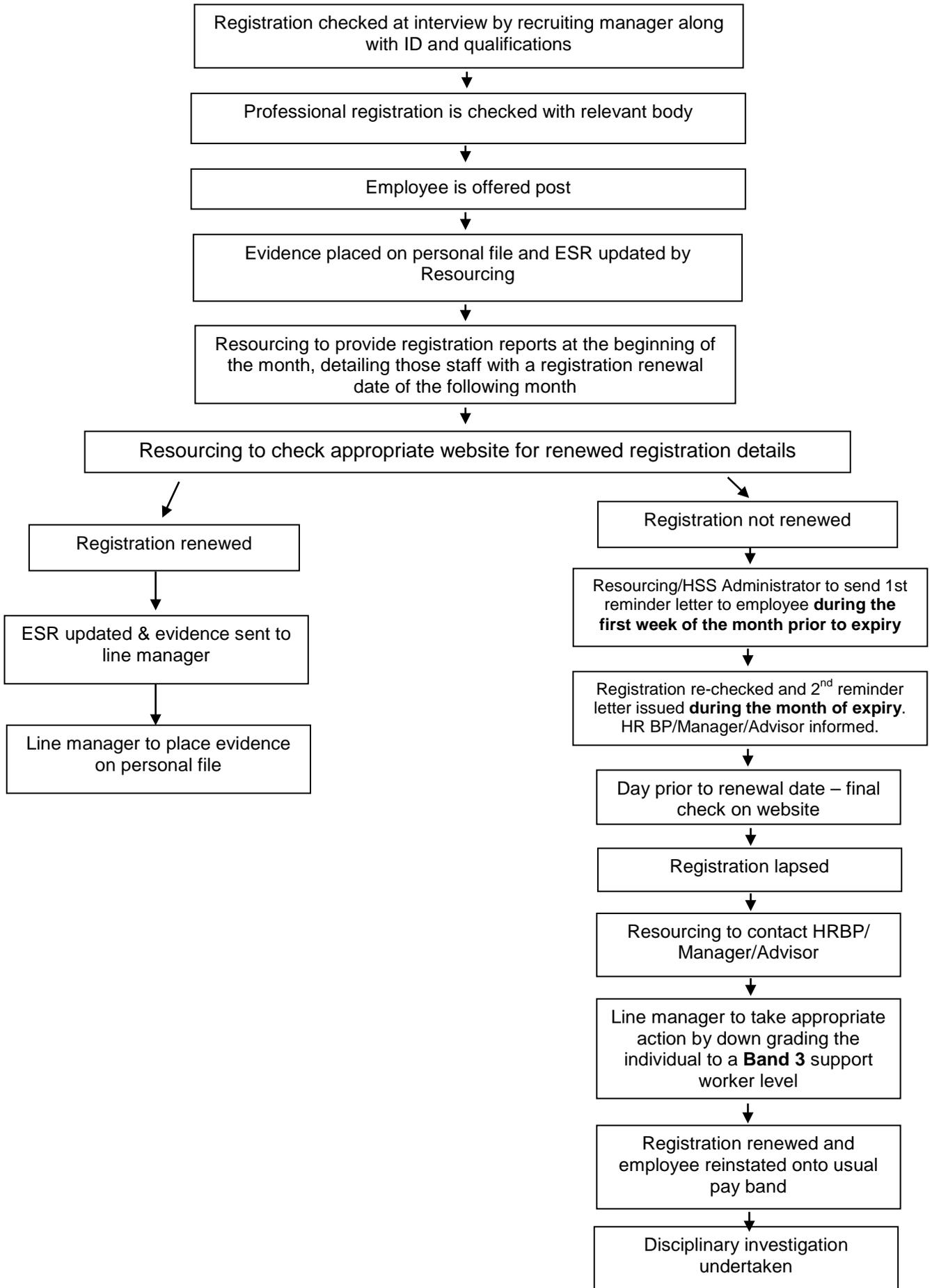
5.2.6 If staff should fail to retain registration or fail to satisfy the validation of registration, the Transactional Team will contact the HR Business Partner/Advisor for the Division, who will then advise the individual's line manager to take the appropriate course of action by down grading the member of staff to a Band 3 support worker level, if this is feasible, until registration is validated. An investigation under the Trusts Disciplinary Procedure will then commence. Upon receipt of the evidence of a renewed registration, the employee will be reinstated onto their usual pay band from the date of re-registration.

5.2.7 In addition to downgrading, following a failure to renew registration or a failure to hold appropriate registration, a disciplinary investigation will be undertaken. The full circumstances surrounding the

failure to be registered will be considered at a disciplinary hearing and this may result in termination of employment.

- 5.2.8 If it is found that an employee has carried out duties commensurate with their registered post whilst their professional registration has lapsed, the relevant professional or regulatory body will be informed, via the appropriate Trust Professional Lead.
- 5.2.9 The Medical Director will be notified of all lapsed GMC registrations and licenses to practice as Responsible Officer for Revalidation, and any lapses will be dealt with in line with GMC guidance.
- 5.2.10 All staff are required to ensure that they maintain their registration with their professional body throughout any periods of maternity, paternity or adoption leave.

FLOW CHART – ALL SERVICES



6. CONSULTATION

(a) This procedure has been developed by the HR Policy Group which consists of representatives from:

- Recognised Staff Organisations
- Senior Managers
- HR Staff
- All Divisions

7. TRAINING AND SUPPORT

- 7.1 No formal training is required however staff should be made aware of the consequences of not complying with their registered bodies.
- 7.2 The Human Resources department will provide support to staff and managers if required.

8. MONITORING

- 8.1 The Transactional Team provides a monthly report containing the names of employees who have been sent a reminder email regarding their professional registration renewal date. On a quarterly basis HR staff at Mersey Care will independently produce a report to check the Electronic Staff Records System in order to identify anomalies and ensure that all registration renewals have been entered onto the system.

In addition to this monitoring nominated HR Staff also receive alerts via the ESR notification service for some professional groups.

9. EQUALITY AND HUMAN RIGHTS ANALYSIS

Title: HR08 VERIFICATION OF STATUTORY REGISTRATION OF TEMPORARY AND PERMANENT STAFF
Area covered: Trust Wide

<p>What are the intended outcomes of this work?</p> <p>Outline the procedure within Mersey Care NHS Foundation Trust for verifying the statutory registration of its staff.</p> <p>To clarify the responsibilities for staff in maintaining their professional registration. To outline the action to be taken in cases of registration lapses.</p> <p>The policy applies to all clinical staff who are required to maintain professional registration.</p> <p>This policy should be read in conjunction with the following documents:</p> <p>NHS Employment check Standards DOH Guidance re professional registration requirements HR0-1 Disciplinary Procedure</p>
<p>Who will be affected?</p> <p>All staff who work for the Trust</p>

Evidence
<p>What evidence have you considered?</p> <p>The policy</p>
<p>Disability inc. learning disability</p> <p>No issues identified</p>
<p>Sex</p> <p>No issues identified</p>
<p>Race</p> <p>No issues identified</p>
<p>Age</p> <p>No issues identified</p>
<p>Gender reassignment (including transgender)</p> <p>No issues identified</p>
<p>Sexual orientation</p> <p>No issues identified</p>
<p>Religion or belief</p> <p>No issues identified</p>
<p>Pregnancy and maternity</p> <p>No issues identified</p>
<p>Carers</p> <p>No issues identified</p>
<p>Other identified groups</p> <p>No issues identified</p>
<p>Cross cutting</p> <p>None identified</p>

Human Rights	Is there an impact? How this right could be protected?
This section must not be left blank. If the Article is not engaged then this must be stated.	
Right to life (Article 2)	No issues identified
Right of freedom from inhuman and degrading treatment (Article 3)	No issues identified
Right to liberty (Article 5)	No issues identified
Right to a fair trial (Article 6)	APPEALS Employees will have the right to appeal against any disciplinary decision including dismissal in accordance with the Trust's Appeal Procedure.
Right to private and family life (Article 8)	No issues identified
Right of freedom of religion or belief (Article 9)	No issues identified
Right to freedom of expression Note: this does not include insulting language such as racism (Article 10)	No issues identified
Right freedom from discrimination (Article 14)	No issues identified

Engagement and involvement
Trade Union Organisations Senior Managers H.R. Staff Divisions

Summary of Analysis
Eliminate discrimination, harassment and victimisation
Advance equality of opportunity
Promote good relations between groups Promoting partnership working between staff side and the Trust.

What is the overall impact? Any negative impact on the equality groups should be low.
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Addressing the impact on equalities HR will review workforce data within workforce meetings.

Action planning for improvement

For the record

Name of persons who carried out this assessment (Min of 3):

Brendan Burke

Sarah Corley

Stephanie Graham

Date assessment completed:

03.11.2016

Name of responsible Director: Amanda Oates Executive Director Of Workforce.

Date assessment was signed: November 2016.

Action plan template

This part of the template is to help you develop your action plan. You might want to change the categories in the first column to reflect the actions needed for your policy.

Category	Actions	Target date	Person responsible and their Directorate
Involvement and consultation	Review equality requirements and seek advice from Trust equality lead.		
Data collection and evidencing	HR/workforce meetings review staff data – taking account of the Protected groups.	On-going	Resourcing team
Public transparency.	Policy to be placed on the Trust website along with this assessment.	November 2016	

Procedure for Verification of Registration upon Commencement of Employment with Mersey Care NHS Foundation Trust

Staff Group	Action Required	By Whom
All Staff Groups	<p>A valid PIN number, verified via the relevant professional or regulatory body, to be checked at interview.</p> <p>On Appointment of the successful candidate Resourcing/Medical Staffing Team will check registration with relevant professional or regulatory body.</p> <p>A copy of the confirmation from the on-line database will be placed in the personnel file and entered into ESR on commencement.</p>	<p>Recruiting Manager</p> <p>Resourcing/Medical Staffing Team</p> <p>Resourcing/Medical Staffing Team</p>
High Secure Services Staff	Resourcing to inform the HSS administrator of new starter registration details at the pre-employment stage.	Resourcing/HSS Administrator