

Accreditation renewal report

Standards 1-8

UK Public Health Register

April 2024

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About the UK Public Health Register

The UK Public Health Register (UKPHR) registers:

- Public Health Practitioners
- Public Health Specialists
- Public Health Specialty Registrars

Its work includes:

- Setting and maintaining standards of practice and conduct
- Maintaining a register of qualified professionals
- Assuring the quality of education and training
- Requiring registrants to keep their skills up to date through continuing professional development.
- Handling complaints and concerns raised against registrants and issuing sanctions where appropriate.

As of 1 January 2024, there were 1342 registrants on the UKPHR register.

The UKPHR was first accredited on 3 April 2013.

In March 2024 we renewed the UKPHR's accreditation with Conditions and Recommendations. They will next be due a full assessment against our Standards by March 2027.

About accreditation

The Professional Standards Authority (the Authority) accredits registers of people working in a variety of health and social care occupations that are not regulated by law. To become an Accredited Register, organisations holding registers of unregulated health and social care roles must prove that they meet our *Standards for Accredited Registers* (the Standards).

Initial accreditation decisions are made by an Accreditation Panel following an assessment of the organisation against the Standards by the Accreditation team. The Panel decides whether to accredit an organisation or not. The Panel can also decide to accredit with Conditions and provide Recommendations to the organisation.

- **Condition** – Issued when a Panel has determined that a Standard has not been met. A Condition sets out the requirements needed for the Accredited Register to meet the Standards, within a set timeframe. It may also reduce the period of accreditation subject to a review or the Condition being met.
- **Recommendation** – Actions that would improve practice and benefit the operation of the Register, but which is not a current requirement for accreditation to be maintained.

This assessment was carried out against the *Standards for Accredited Registers*¹ and our supporting Evidence Framework².

We used the following in our assessment of the UKPHR:

- Documentary review of evidence supplied by the UKPHR and gathered from public sources such as its website.
- Due diligence checks
- Share your experience responses.
- Assessment of the UKPHR's complaints procedures.

¹ https://professionalstandards.org.uk/docs/default-source/publications/standards/standards-for-accredited-registers.pdf?sfvrsn=e2577e20_8

² https://professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-evidence-framework-for-standards.pdf?sfvrsn=55f4920_9

The Outcome

The Accreditation Panel met on 28 March 2024 to consider the UKPHR. The Accreditation Panel was satisfied that the UKPHR met all the *Standards for Accredited Registers*, with two Conditions.

We therefore decided to renew accreditation with two Conditions.

We noted the following **positive findings**:

- In October 2020, UKPHR published separate guidance³ for registrants about whistleblowing and the professional duty of candour.
- The UKPHR sustainable development policy⁴ reflects commitment to contribute positively to environmental, social, and economic well-being.

We issued the following Conditions to be implemented by the deadline given:

Conditions		Deadline
Standard Four	<ul style="list-style-type: none">• Condition One: The UKPHR should make clearer how people who have gained qualifications and/or experience overseas can demonstrate equivalence with the requirements for registration.	Next annual assessment
Standard Five	<ul style="list-style-type: none">• Condition Two: The UKPHR should document its interim suspension order process, so it is clear how interim orders are issued, reviewed, and lifted.	Six months from the date of publication.

We issued the following Recommendations to be considered by the next review:

Recommendations	
Standard Two	<ul style="list-style-type: none">• Recommendation One: UKPHR should consider creating a field on its register showing the registrant's registration with a statutory regulator, if applicable. This will assist the public in making informed decisions and facilitate raising concerns with appropriate bodies.

³ [Whistle-blowing-etc-guidance-01-Oct-2020.pdf \(ukphr.org\)](#)

⁴ [UKPHR-Sustainable-Development-Policy-3rd-Edition-March-2024.pdf](#)

Standard Six	<ul style="list-style-type: none"> Recommendation Two: The UKPHR should consider succession planning in its business continuity plans.
Standard Eight	<ul style="list-style-type: none"> Recommendation Three: The Accreditation Quality Mark should be displayed on the UKPHR website.

About the Register

- This section provides an overview of the UKPHR and its register.

Name of Organisation	UK Public Health Register (UKPHR)
Website	Join the Register - UK Public Health Register (ukphr.org)
Type of Organisation	UKPHR is a charity registered in England, (charity number 1162895) and in Scotland, (SC045877) and a limited company register with Companies House, (company number 04776439).
Role(s) covered	Public Health Specialist Public Health Practitioner Public Health Specialty Registrar
Number of registrants	1342 registrants as of January 2024.
Overview of Governance	There is a small staff team overseen by the Chief Executive who are responsible for the day to day running of the organisation. UKPHR is overseen by a Board of Trustees consisting of twelve members who are a mix of lay and professional members. There are three committees Registration, Education and Training Standards and the Audit, Risk and Remuneration Committee.
Overview of the aims of the register	The objects of the charity are laid out in UKPHR's Articles of Association. These are summarised by UKPHR in the FAQ section of the website. The UKPHR define its purpose as 'protecting and improving health and wellbeing of our communities and ensuring fair access to good quality healthcare services are objectives that lie at the heart of Public Health. The purpose of UKPHR is to provide public assurance for the provision of a competent workforce that contributes to a high-quality public health service to deliver those objectives.'

Inherent risks of the practice

This section uses the criteria developed as part of the Authority's *Right Touch Assurance tool*⁵ to give an overview of the work of those on the UKPHR register.

⁵ https://www.professionalstandards.org.uk/docs/default-source/publications/policy-advice/right-touch-assurance---a-methodology-for-assessing-and-assuring-occupational-risk-of-harm91c118f761926971a151ff000072e7a6.pdf?sfvrsn=f537120_14.

Risk criteria	
<p>1. Scale of risk associated with public health specialists, practitioners, and speciality registrars:</p> <p><i>a. What do Public Health specialists, practitioners and speciality registrars do?</i></p> <p><i>b. How many Public Health specialists, practitioners and speciality registrars are there?</i></p> <p><i>c. Where do Public Health specialists, practitioners, and speciality registrars work?</i></p> <p><i>d. Size of actual/potential service user group</i></p>	<p>a. Those on the public health register undertake activities ‘to strengthen public health capacities and service aim to provide conditions under which people can maintain to be healthy, improve their health and wellbeing, or prevent the deterioration of their health. Public health focuses on the entire spectrum of health and wellbeing, not only the eradication of diseases.’ Interventions can include public health campaigns such as encouraging the uptake of vaccinations through to more individual services such as administering vaccinations or providing health advice.</p> <p>b. UKPHR reported that: ‘The entirety of the multi-disciplinary (i.e., non-medical and non-dental) specialist workforce is on the UKPHR register; it is a UK-wide requirement for all public health specialists to be registered with the UKPHR, the GMC, or the GDC.</p> <p>For practitioners, the most recent data available is from 2018, which indicated approximately 10% of the workforce was on the register at that time. NHS England- Workforce, Training, & Education is currently undertaking a UK-wide public health census, which will give us more up to date data. We know the register has expanded by approximately 40% since 2018.</p> <p>For specialty registrars, registration is not a requirement. Of the 242 number of multi-disciplinary trainees currently in the system, 8 are registered with UKPHR. Trainees in the same programme who are medically qualified will all be registered with the GMC.’</p> <p>c. Those registered with UKPHR work across the UK in a range of settings. UKPHR reports that the main employers are the NHS, local authorities, and national public health agencies in the four nations: Public Health Wales, Public Health Scotland, Public Health Agency (Northern Ireland), UK Health Security Agency (England), and the Office of Health Inequalities and Disparities (England).</p> <p>d. UKPHR reports that its registrants do not normally engage directly with service users, as interventions offered tend to be at the population level. The size of the population will depend on the intervention being offered which could be national or more local interventions.</p>

<p>2. Means of assurance</p>	<p>Those working within the NHS are likely to be included within clinical governance systems. Those working for other employers such as local authorities will be subject to employer checks which may include criminal records.</p>
<p>3. About the sector in which Public Health specialists, practitioners and speciality registrars operate</p>	<p>At a national level responsibility for public health falls under the following bodies:</p> <ul style="list-style-type: none"> • UK Health Security Agency (UKHSA) and Office for Health Improvement & Disparities (OHID) (England). These organisations replaced Public Health England, the UKHSA launched in April 2021 and the OHID in October 2021. • Public Health Scotland • Public Health Wales • Public Health Agency (Northern Ireland) <p>These organisations are responsible for public health policy.</p> <p>The public health workforce is multi-disciplinary, those who are public health doctors, dentists or nurses are registered with the respective regulator. UKPHR aims to provide a regulatory framework to public health professionals from several disciplines to demonstrate equivalence of practice and competence.</p>
<p>3. Risk perception.</p> <ul style="list-style-type: none"> • <i>Need for public confidence in Public Health specialists, practitioners, and speciality registrars?</i> • <i>Need for assurance for employers or other stakeholders?</i> 	<p>Interventions offered by the public health workforce often rely on individuals in the population to act, it is important that the public and other stakeholders have confidence in this workforce for these interventions to work.</p>

Assessment against the Standards

Standard One: Eligibility and 'public interest test'

Summary

The UK Public Health Register (UKPHR) is a register for public health professionals in the United Kingdom. The UKPHR registers three roles: public health specialists, public health practitioners, and public health specialty registrars. The main responsibilities for these roles are:

- **Public Health Specialists:** these are strategists, senior managers or senior scientists who plan, deliver, and evaluate interventions aimed at influencing population health at local, regional, and national levels. They 'provide professional, evidence-based, and ethical advice to guide the commissioning of services, ensuring that they are high-quality, clinically safe, cost-effective, and that they will improve health and wellbeing and reduce health inequalities across primary care, secondary care, and social care.' They work in and with a range of organisations and will have less direct service user contact⁶.
- **Public Health Practitioners** can work in health improvement and health protection, health information, community development, in a wide range of settings from the NHS and local government to the voluntary, and private sectors. They are responsible for individual and population level interventions. They 'have a great influence on the health and wellbeing of individuals, groups, communities and populations.' The NHS website states that Public Health Practitioners 'may support healthy lifestyle programmes, helping individuals and groups to stop smoking and take more exercise.' The NHS website also noted that it includes roles such as smoking cessation advisor, substance misuse worker and public health nutritionist⁷.
- **Public Health Specialty Registrars:** Those on the register as a specialty registrar are in the process of completing the faculty of public health training and, as such, will be required to complete placements. Once they have completed their training, they will be eligible to apply for jobs as Public Health Consultants. They focus on population health interventions.

Specialists and Practitioners work within NHS settings in primary, secondary, and community care, within the local authority, and in public bodies such as the UK Health Security Agency, the Office for Health Improvement and Disparities, the Department

⁶ <https://www.healthcareers.nhs.uk/explore-roles/public-health/roles-public-health/public-health-consultants-and-specialists>

⁷ <https://www.healthcareers.nhs.uk/explore-roles/public-health/roles-public-health/public-health-practitioner/public-health-practitioner>

of Health and Social Care, Public Health Scotland, Public Health Wales, and the Public Health Agency (NI).

We completed the Standard One assessment⁸ in January 2023. We found that the UKPHR's register falls within the scope of the Accredited Registers programme. There are clear benefits of the practice of those registered on the UKPHR's register to the health of the UK population. We found it is in the public interest to have a register of public health practitioners who meet appropriate standards of competence, conduct, and business practice, as required by the UKPHR.

Consequently, we found that Standard One was met. We issued one recommendation:

- Recommendation: The UKPHR should review and update its risk matrix to ensure that it covers all risks including those related to health inequalities and misinformation. Risks in Section A that relate to registrant practice should be reviewed to ensure they capture the risks in terms of risks to the public rather than risks to UKPHR.

We did not identify any new information that could affect Standard One being met, during this renewal assessment. We have considered whether this Recommendation have been considered, under the relevant Standards 2-8.

Standard 2: Management of the register

Summary

The Accreditation Panel found that Standard Two was met. It issued the following Recommendation:

Recommendation:

- Recommendation One: UKPHR should consider creating a field on its register showing the registrant's registration with a statutory regulator, if applicable. This will assist the public in making informed decisions and facilitate raising concerns with appropriate bodies.

Accreditation Panel findings

- Public health practitioner, specialist, and speciality registrar registration are the three registration categories that UKPHR offers. There are multiple routes to obtain registration within each category.

⁸ https://www.professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-supplementary-guidance-for-standard-one.pdf?sfvrsn=3e5f4920_6

- For the practitioner role, applicants must apply through the local assessment scheme or apprenticeship route; for the specialist role, they must apply through, dual registration, portfolio assessment or completion of public health specialty training and to be eligible for the speciality registrar registration must participate in the specialty training programme.
- The UKPHR publishes the detailed [registration requirements](#) for each role that it registers, along with maintaining registration. There is an appeals mechanism⁹ for registration decisions and a practitioner registration review policy to request a review of the verification panel's refusal to admit to the UKPHR Register.
- We noted that prospective applicants from overseas might have difficulty finding information on how they can demonstrate equivalence of overseas experience through the equivalence route. We have issued a Condition relating to this under Standard Four.
- The UKPHR has a 5-year mandatory re-registration process for practitioners and a revalidation process for specialists. UKPHR informed us that they are revising their revalidation policy. The confirmation by the registrant's appraiser will be included (by the registrant's employer or Faculty of Public Health), and UKPHR will verify the appraiser's confirmation. This CPD approach is based on regulations by statutory regulators.
- The website states that 'UKPHR will not impose a requirement in respect of CPD on registrants participating in specialty training, believing that the standard of CPD it requires for specialist registrants is fulfilled by participation in the specialty training programme'. We considered this approach to be reasonable.
- The restoration policy¹⁰ sets out details for restoration to the register if registration is withdrawn, lapsed, or archived. All restoration decisions are made by the Registrar.
- The UKPHR operates a public register for public health professionals. Their register is published at: [View UKPHR Register](#) . The UKPHR's register includes the relevant fields, such as full name, category of registration, route of registration, date of registration, and registration number (unique ID). Restrictions on practice such as sanction would appear at the register although none were in the place at the time of our assessment.

⁹ [Appeals-Rules-May-23-FINAL.pdf \(ukphr.org\)](#)

¹⁰ [Lapsed-Restoration-Withdrawal-Policy-4th-Edition.pdf \(ukphr.org\)](#)

- Although the UKPHR's register includes most of the fields that we would expect, we noted that the UKPHR's registrants may also be registered with statutory bodies such as the General Medical Council (GMC) and the General Dental Council (GDC). The UKPHR should provide links to other regulators that registrants may belong to assist the public in making informed decisions. The Accreditation Panel issued the following Recommendation.
- Recommendation One: UKPHR should consider creating a field on its register showing the registrant's registration with a statutory regulator, if applicable. This will assist the public in making informed decisions and facilitate raising concerns with appropriate bodies.

Standard 3: Standards for registrants

Summary

The Accreditation Panel found that Standard Three was met.

Accreditation Panel findings

- The UKPHR published the conditions of registration 2018¹¹ which is a legally binding agreement between the registrant and UKPHR. UKPHR informed that they are going to review registration conditions in 2024.
- Adherence to the Code of Conduct¹² and Good Public Health Practice¹³ is mandatory for registrants. The Code of Conduct outlines the professional conduct expected of registrants and addresses essential areas mandated by Standard Three, such as operating within clearly defined boundaries of competence and acting with accountability, honesty, integrity, and respect. Confidentiality, data handling, and information sharing are also covered under the Code. The Accreditation Panel considered that it was positive that the UKPHR publishes separate guidance for the duty of candour and whistleblowing.
- The UKPHR has arrangements for handling safeguarding concerns. The safeguarding guidance¹⁴ referring to the 'Good Public Health Practice Framework 2016' places a duty on all registrants to safeguard and protect the health and wellbeing of the population. This is further underpinned by the Code of Conduct.

¹¹ [Conditions-of-Registration-2018.pdf \(ukphr.org\)](#)

¹² [Code-of-Conduct-2015.pdf \(ukphr.org\)](#)

¹³ [Good-Public-Health-Practice-Framework_-2016_Final-2.pdf \(ukphr.org\)](#)

¹⁴ [Safeguarding-guidance-01-Oct-2020.pdf \(ukphr.org\)](#)

- Public health professionals generally practice as employed persons and will normally be protected by employers' liability. Registrants are required to confirm they hold professional indemnity insurance as part of their registration.

Standard 4: Education and training

The Accreditation Panel found that Standard Four was met. It issued the following Condition.

- Condition One: The UKPHR should make clearer how people who have gained qualifications and/or experience overseas can demonstrate equivalence with the requirements for registration.

Accreditation Panel findings

- The National Occupational Standards for Public Health, the Faculty of Public Health curriculum, the Public Health Skills, and Knowledge Framework (2016), and the NHS's Knowledge and Skills Framework were all consulted in the development of the UKPHR's education and training requirements.
- The UKPHR does not accept direct applications from individuals wishing to apply for practitioner registration. For the practitioner role, individuals need to go through a quality-assured local assessment scheme, undergo a rigorous process of assessment and verification by trained public health professionals, or undertake a practitioner apprenticeship in line with the Institute for Apprenticeships and Technical Education.
- The UKPHR does not set curricula for public health education or training. The public health specialty training curriculum¹⁵ is set by the Faculty of Public Health (FPH), accepted as part of the specialty route onto the register, and quality assured by the GMC to ensure it meets standards.
- The Education and Standards Committee works with the FPH on curricula and oversees local assessment schemes as well as education and training requirements. The Committee is composed of a diverse group of members, will include a representative of the FPH, the Royal Society of Public Health, the Association of Directors of Public Health, and an employer.
- We have asked about equivalence route from UKPHR. The portfolio evaluation route is an equivalence path onto the specialist register, UKPHR have informed us. In the specialist registration guideline¹⁶, UKPHR has included information

¹⁵ [public-health-curriculum-2022-v13_final.pdf \(fph.org.uk\)](#)

¹⁶ [UKPHR-SRbPA-Preapplication-applicant-guidance-February-2024.pdf](#)

for overseas experience, it limits access to only those with prior experience in the UK.

- We noted that the UKPHR should have a formal process for assessing equivalence for those trained overseas. The Accreditation Panel discussed the purpose of establishing an equivalence route. The benefits of this could be two-fold: it could increase the diversity of registrants and provide a fair approach; and support workforce supply. We did not identify any reasons why it might not be appropriate to consider applications from people who have qualified overseas, and that the general approach by the GMC and other regulators allowed for this.
- To address this, the Accreditation Panel issued the following Condition:
- Condition One: The UKPHR should make clearer how people who have gained qualifications and/or experience overseas can demonstrate equivalence with the requirements for registration.

Standard 5: Complaints and concerns about registrations

The Accreditation Panel found that Standard Five was met. It issued the following Condition.

- Condition Two: The UKPHR should document its interim suspension order process, so it is clear how interim orders are issued, reviewed, and lifted.

Accreditation Panel findings

- As per its 'Triple C' policy, the UKPHR's website invites people to raise their comments, complaints, and compliments. There is [guidance](#) available for raising any concern regarding UKPHR and registrants. The complaints may be expressed in writing or verbally. We observed that the guidelines include contact information, including phone numbers and email addresses, to facilitate this. However, we were unable to access the Triple C form from the website due to a broken link and ask that the UKPHR update this.
- The Registrar facilitates the process of receiving and responding to a complaint. If the Registrar considers a registrant's fitness to practice (FTP) impaired, formal proceedings will be initiated as per the [Fitness to Practice Rules](#). Further, the FTP panel may take no action, invite the Registrant to agree a statement of remedial action, issue a warning, issue conditions, suspend, or remove, as per the rules.

- The UKPHR has an [appeals policy](#) under which the complainant may appeal the hearing decision. An appeal should be filed within 28 days and will be heard by the Appeals Panel, which consists of a chair, one lay member, and one regulated public health professional. There is lay participation in complaint decisions.
- We were not clear about the interim suspension order process, should there be an immediate public protection concern about a registrant. The UKPHR informed us that it intends to formalise the process in 2024. The Accreditation Panel noted there was a lack of detail about how an interim order could be lifted or reviewed, so issued a condition.
- The Accreditation Panel issued the following Condition:
 - Condition Two: The UKPHR should document its interim suspension order process, so it is clear how interim orders are issued, reviewed, and lifted.
- A specific [webpage](#) is available for sanctions. At the time of the assessment, there were no restrictions on practice in place for any registrant. UKPHR has guidance¹⁷ for determining the length of restrictions on practice applies to all types of sanction. We noted the relatively long time that some sanctions are published for, such as 15 years for a suspension of longer than three months and 10 years for a suspension of three months or less.
- The Registrar ensures relevant bodies are informed of complaint outcomes where it is in the public interest to do so. UKPHR is a signatory to the Collaborative of Accredited Registers Information Sharing Protocol¹⁸ which means that it has agreed to share information with other Accredited Registers about decisions to remove people from its register.

Standard 6: Governance

The Accreditation Panel found that Standard Six was met with Conditions. It issued the following Recommendations.

- Recommendation Two: The UKPHR should consider succession planning in its business continuity plans.

¹⁷ [Publication-of-sanctions-duration.pdf \(ukphr.org\)](#)

¹⁸ [accredited-registers-information-sharing-protocol.pdf \(gcrb.org.uk\)](#)

Accreditation Panel findings

- The UKPHR's focus on public protection is set out in its objective and values. Its Strategy 2024-29¹⁹ sets out its key themes as:
 - 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.
- The UKPHR is governed by its Article of Association and Standing Order. It is operated by a Board of Directors supported by three committees: the Registration Approvals Committee, the Education and Standards Committee, and the Audit, Risk, and Remuneration Committee. The committee roles are outlined in their respective terms of reference. The Articles of Association cover managing conflicts of interest by directors.
- The UKPHR provides clear and accessible information about its governance on its [website](#). Included in this are the board members' biographies and job descriptions. Additionally, minutes from committee meetings and board meetings are published.
- We noted during our assessment that for a period of 12 months (April 2023-March 2024), the UKPHR operated with one more Board member than its articles permit. Discussion on returning to a maximum of 12 members was noted in the minutes and discussed at its AGM on Sep 14, 2023. The reasons for this were to achieve the necessary skills in the Board, and the UKPHR now has a plan to achieve this through Board development. Although this provides transparency, and does not present a public protection concern, we note the importance of Articles of Association as a contractual document and would expect the UKPHR to avoid this scenario in the future.
- The Audit, Risk, and Remuneration Committee oversees the risk management strategy, meets to address new and emerging risks, reviews the risk register monthly, and advises the Board on all aspects of risk and control.
- The UKPHR's business continuity plans integrate processes for loss of equipment, site, power, and communications, along with disaster preparedness. The Accreditation Panel discussed that UKPHR is run by a small team, and therefore it may wish to consider succession planning as part of this.
- The Accreditation Panel issued the following Recommendation:

¹⁹ [UKPHR-Strategy-2024-2029-FULL.pdf](#)

- Recommendation Two: The UKPHR should consider succession planning in its business continuity plans.

Standard 7: Management of the risks arising from the activities of registrants

The Accreditation Panel found that Standard Seven was met.

Accreditation Panel findings

- We assessed risks identified, managed, and mitigated relevant to the practice of its registrants' work within our assessment of Standard One. This includes an evaluation of the UKPHR's risk matrix.
- Potential risks resulting from registrants' professional practice are covered by UKPHR's risk register, which is divided into three categories: risks that are intrinsic to healthcare regulation, risks that are under UKPHR control, and risks that affect the public health system. As set out in Standard 6, the Audit, Risk, and Remuneration Committee oversees the risk register. We checked the committee minutes of the January 20, 2024, meeting, which included a discussion of each individual risk in the risk register as well as risk appetite. The discussion on the risk register was generally covered in all the committee meetings.
- UKPHR publishes detailed guidance about its three roles. This helps inform those using their services about both the scope and limitations of the role. A particularly helpful piece of information on public health is the guidance provided by the FPH²⁰. Their role is 'to improve the health and wellbeing of local communities and national populations'.
- The benefits of being a public health professional are also highlighted through UKPHR awards for innovation in public health. Also, videos are uploaded to the website about the roles offered by UKPHR.

Standard 8: Communications and engagement

The Accreditation Panel found that Standard Eight was met. It issued the following Recommendation:

- Recommendation Three: The Accreditation Quality Mark should be displayed on the UKPHR website.

²⁰ [Membership - FPH - Faculty of Public Health](#)

Accreditation Panel findings

- The UKPHR's website is clearly set out and includes dedicated areas for key process such as 'View the Register', registration criteria etc. The UKPHR has also developed a set of Frequently Asked Questions for its re-registration and revalidation processes.
- The UKPHR informed us that they engage with key stakeholders such as the FPH, GMC, and other bodies. The UKPHR solicits feedback from its service users and other stakeholders through surveys on portal evaluation, assessor training, and revalidation provision. Survey results are further used to identify potential improvements. In addition to this, the UKPHR holds its own conferences to disseminate knowledge among members and wider stakeholders.
- Although the UKPHR provides information about accreditation on its website, we could not see the Accreditation Quality Mark. We encourage the use of the Quality Mark to increase credibility and make it easier for the public and employers to recognise qualified practitioners and accredited registers. The Quality Mark represents commitment to high standards in professional practice. The Accreditation Panel issued the following recommendation:
- Recommendation Three: The Accreditation Quality Mark should be displayed on the UKPHR website.

Share your experience.

We did not receive any responses to the invitation to share experience of the UKPHR.

Impact assessment (including Equalities impact)

- We carried out an impact assessment as part of our decision to renew accreditation of the UKPHR. This impact assessment included an equalities impact assessment as part of the consideration of our duty under the Equality Act 2010.
- We have introduced our new Standard for Accredited Registers: Standard Nine: Equality, Diversity, and Inclusion.²¹ In this assessment, we will check how, for example, the UKPHR acts to 'understand the diversity of its registrants, service

²¹ [Standards for Accredited Registers 2023 \(professionalstandards.org.uk\)](https://www.professionalstandards.org.uk)

users and complainants and has an awareness of issues that may impact those with protected characteristics as defined by the Equality Act 2010.²²

- As discussed under Standard 4, an equivalence route may contribute to increased diversity and workforce development. It is therefore important for the UKPHR to consider a clear equivalence route for each role. We issued Condition 2 under Standard Four to address this.
- The UKPHR published its [Equality and Diversity Policy](#) which aims to ‘prevent, reduce and stop all forms of unlawful discrimination within UKPHR and its services by removing unfair and discriminatory practices within and in relation to any aspects of the organisation and promote equality and diversity and ensure all those engaged in any activity with UKPHR are treated with respect and dignity and free from discrimination and abuse’.
- No other issues were identified that could affect the impact assessment. The Accreditation Panel found that it was in the public interest to continue to accredit the UKPHR.

²² [Equality Act 2010: guidance - GOV.UK \(www.gov.uk\)](#)